

FORM
5A

Rev
06/12

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400374537

Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100185
2. Name of Operator: ENCANA OIL & GAS (USA) INC
3. Address: 370 17TH ST STE 1700
City: DENVER State: CO Zip: 80202-
4. Contact Name: Sheilla Reed-High
Phone: (720) 876-3678
Fax: (720) 876-4678

5. API Number 05-013-06647-00
6. County: BOULDER
7. Well Name: DEASON
Well Number: 2-36
8. Location: QtrQtr: NENW Section: 36 Township: 2N Range: 69W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

| | | | | | |
|-----------------------------------|------------------|-----------------------------|----------------------|--|--|
| FORMATION: <u>CODELL</u> | | Status: <u>COMMINGLED</u> | | Treatment Type: <u>FRACTURE STIMULATION</u> | |
| Treatment Date: <u>09/13/2012</u> | | End Date: <u>09/28/2012</u> | | Date of First Production this formation: <u>10/13/2012</u> | |
| Perforations | Top: <u>7662</u> | Bottom: <u>7676</u> | No. Holes: <u>42</u> | Hole size: <u>0.42</u> | |

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

Set CFP @ 7725'. 09-15-12
 Frac'd the Codell 7662'-7676' (42 holes) w/ 89,586 gal 22# Vistar Hybrid cross linked gel containing 250,100 # 30/50 sand. 09-17-12

| | |
|--|---|
| This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Total fluid used in treatment (bbl): <u>2766</u> | Max pressure during treatment (psi): <u>4673</u> |
| Total gas used in treatment (mcf): _____ | Fluid density at initial fracture (lbs/gal): <u>8.34</u> |
| Type of gas used in treatment: _____ | Min frac gradient (psi/ft): <u>0.76</u> |
| Total acid used in treatment (bbl): _____ | Number of staged intervals: <u>1</u> |
| Recycled water used in treatment (bbl): <u>2766</u> | Flowback volume recovered (bbl): _____ |
| Fresh water used in treatment (bbl): _____ | Disposition method for flowback: <u>DISPOSAL</u> |
| Total proppant used (lbs): <u>250100</u> | Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/> |

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

| | | | | |
|--------------------------------|-----------------------------|-------------------------|------------------------|----------------|
| Date: _____ | Hours: _____ | Bbl oil: _____ | Mcf Gas: _____ | Bbl H2O: _____ |
| Calculated 24 hour rate: _____ | Bbl oil: _____ | Mcf Gas: _____ | Bbl H2O: _____ | GOR: _____ |
| Test Method: _____ | Casing PSI: _____ | Tubing PSI: _____ | Choke Size: _____ | |
| Gas Disposition: _____ | Gas Type: _____ | Btu Gas: _____ | API Gravity Oil: _____ | |
| Tubing Size: _____ | Tubing Setting Depth: _____ | Tbg setting date: _____ | Packer Depth: _____ | |

Reason for Non-Production:

| | | |
|---------------------------------|---|-----------------------------------|
| Date formation Abandoned: _____ | Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, number of sacks cmt _____ |
|---------------------------------|---|-----------------------------------|

** Bridge Plug Depth: _____
 ** Sacks cement on top: _____
 ** Wireline and Cement Job Summary must be attached.

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED Treatment Type: _____
Treatment Date: _____ End Date: _____ Date of First Production this formation: 10/13/2012
Perforations Top: 7454 Bottom: 8130 No. Holes: 140 Hole size: 0.42
Provide a brief summary of the formation treatment: _____ Open Hole: ☐

Set CBP @ 7420'. 09-27-12
Drilled out CBP and CFP's to commingle the JSND-NBRR-CDL. 09-28-12

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): _____
Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____
Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____
Total acid used in treatment (bbl): _____ Number of staged intervals: _____
Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____
Total proppant used (lbs): _____ Rule 805 green completion techniques were utilized: ☐
Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 10/22/2012 Hours: 24 Bbl oil: 78 Mcf Gas: 397 Bbl H2O: 48
Calculated 24 hour rate: Bbl oil: 78 Mcf Gas: 397 Bbl H2O: 48 GOR: 5090
Test Method: FLOWING Casing PSI: 1410 Tubing PSI: 633 Choke Size: 12/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1269 API Gravity Oil: 52
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8078 Tbg setting date: 09/28/2012 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

| | | | | | |
|-----------------------------------|------------------|-----------------------------|----------------------|--|--|
| FORMATION: <u>J SAND</u> | | Status: <u>PRODUCING</u> | | Treatment Type: <u>FRACTURE STIMULATION</u> | |
| Treatment Date: <u>09/13/2012</u> | | End Date: <u>09/28/2012</u> | | Date of First Production this formation: <u>10/13/2012</u> | |
| Perforations | Top: <u>8100</u> | Bottom: <u>8130</u> | No. Holes: <u>50</u> | Hole size: <u>0.42</u> | |

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

Frac'd the J-Sand 8100'-8105', 8110'-8130', (50 holes)w/ 65,898 gal 18 # Vistar Hybrid cross linked gel containing 250,440 # 20/40 Sand. 09-13-12

This formation is commingled with another formation: ☒ Yes ☐ No

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|---|---|
| Total fluid used in treatment (bbl): <u>3851</u> | Max pressure during treatment (psi): <u>3395</u> |
| Total gas used in treatment (mcf): _____ | Fluid density at initial fracture (lbs/gal): <u>8.34</u> |
| Type of gas used in treatment: _____ | Min frac gradient (psi/ft): <u>0.57</u> |
| Total acid used in treatment (bbl): _____ | Number of staged intervals: <u>1</u> |
| Recycled water used in treatment (bbl): <u>3851</u> | Flowback volume recovered (bbl): _____ |
| Fresh water used in treatment (bbl): _____ | Disposition method for flowback: <u>DISPOSAL</u> |
| Total proppant used (lbs): <u>250440</u> | Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/> |

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

| | | | | |
|--------------------------|-----------------------------|-------------------------|------------------------|----------------|
| Date: _____ | Hours: _____ | Bbl oil: _____ | Mcf Gas: _____ | Bbl H2O: _____ |
| Calculated 24 hour rate: | Bbl oil: _____ | Mcf Gas: _____ | Bbl H2O: _____ | GOR: _____ |
| Test Method: _____ | Casing PSI: _____ | Tubing PSI: _____ | Choke Size: _____ | |
| Gas Disposition: _____ | Gas Type: _____ | Btu Gas: _____ | API Gravity Oil: _____ | |
| Tubing Size: _____ | Tubing Setting Depth: _____ | Tbg setting date: _____ | Packer Depth: _____ | |

Reason for Non-Production:

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

| | | | | | |
|--|---|--|--|---|--|
| FORMATION: NIOBRARA-CODELL | | Status: PRODUCING | | Treatment Type: _____ | |
| Treatment Date: _____ | | End Date: _____ | | Date of First Production this formation: 10/13/2012 | |
| Perforations | Top: 7454 | Bottom: 7676 | No. Holes: 90 | Hole size: 0.42 | |
| Provide a brief summary of the formation treatment: | | | Open Hole: <input type="checkbox"/> | | |
| This formation is commingled with another formation: | | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Total fluid used in treatment (bbl): _____ | | | Max pressure during treatment (psi): _____ | | |
| Total gas used in treatment (mcf): _____ | | | Fluid density at initial fracture (lbs/gal): _____ | | |
| Type of gas used in treatment: _____ | | | Min frac gradient (psi/ft): _____ | | |
| Total acid used in treatment (bbl): _____ | | | Number of staged intervals: _____ | | |
| Recycled water used in treatment (bbl): _____ | | | Flowback volume recovered (bbl): _____ | | |
| Fresh water used in treatment (bbl): _____ | | | Disposition method for flowback: _____ | | |
| Total proppant used (lbs): _____ | | | Rule 805 green completion techniques were utilized: <input type="checkbox"/> | | |
| Reason why green completion not utilized: _____ | | | | | |
| Fracture stimulations must be reported on FracFocus.org | | | | | |
| <u>Test Information:</u> | | | | | |
| Date: _____ | Hours: _____ | Bbl oil: _____ | Mcf Gas: _____ | Bbl H2O: _____ | |
| Calculated 24 hour rate: _____ | Bbl oil: _____ | Mcf Gas: _____ | Bbl H2O: _____ | GOR: _____ | |
| Test Method: _____ | Casing PSI: _____ | Tubing PSI: _____ | Choke Size: _____ | | |
| Gas Disposition: _____ | Gas Type: _____ | Btu Gas: _____ | API Gravity Oil: _____ | | |
| Tubing Size: _____ | Tubing Setting Depth: _____ | Tbg setting date: _____ | Packer Depth: _____ | | |
| Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> | | | | | |
| Date formation Abandoned: _____ | Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, number of sacks cmt _____ | | | |
| ** Bridge Plug Depth: _____ | ** Sacks cement on top: _____ | ** Wireline and Cement Job Summary must be attached. | | | |

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION
Treatment Date: 09/13/2012 End Date: 09/28/2012 Date of First Production this formation: 10/13/2012
Perforations Top: 7454 Bottom: 7466 No. Holes: 48 Hole size: 0.42
Provide a brief summary of the formation treatment: Open Hole: ☐

Set CFP @ 7526'. 09-17-12
Frac'd the Niobrara 7454-7466', (48 holes), w/ 96,516 gals 18 # Vistar Hybrid cross linked gel containing 250,200 # 30/50 sand. 09-17-12

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 3228 Max pressure during treatment (psi): 5102
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment: Min frac gradient (psi/ft): 0.83
Total acid used in treatment (bbl): Number of staged intervals: 1
Recycled water used in treatment (bbl): 3228 Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 250200 Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: Hours: Bbl oil: Mcf Gas: Bbl H2O:
Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR:
Test Method: Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: SOLD Gas Type: DRY Btu Gas: API Gravity Oil:
Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

** Bridge Plug Depth: ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: Print Name: sheillahigh@msn.com

Title: Drilling and Compl. Tech. Date: Email sheilla.reedhigh@Encana.com

Attachment Check List

| Att Doc Num | Name |
|-------------|------------------|
| 400374586 | WELLBORE DIAGRAM |

Total Attach: 1 Files

General Comments

| User Group | Comment | Comment Date |
|------------|---------|--------------|
| | | |

Total: 0 comment(s)