

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: Judith Walter Phone: (720) 876-3702 Fax: (720) 876-4702

5. API Number 05-045-20770-00
6. County: GARFIELD
7. Well Name: ENCANA FEE Well Number: 19-5A2 (K19CNE)
8. Location: QtrQtr: LOT 3 Section: 19 Township: 6S Range: 92W Meridian: 6
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: WILLIAMS FORK Status: SHUT IN Treatment Type:

Treatment Date: 03/10/2012 End Date: Date of First Production this formation: 03/19/2012

Perforations Top: 5730 Bottom: 7495 No. Holes: 189 Hole size: 0.38

Provide a brief summary of the formation treatment: Open Hole: []

Stages 01-07 treated with a total of: 116579 bbls of Slickwater.

This formation is commingled with another formation: [] Yes [X] 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: 03/19/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 181 Bbl H2O: 1099
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 181 Bbl H2O: 1099 GOR: 0
Test Method: Flowing Casing PSI: 1750 Tubing PSI: 0 Choke Size: 28/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1170 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6899 Tbg setting date: 03/23/2012 Packer Depth:

Reason for Non-Production: 3/20/2012: Well Shut In to maintain our water balance at Mamm Creek. No tubing pressure reading as the tubing was landed after the flow test information was recorded.

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: Judith Walter

Title: Regulatory Analyst Date: 4/16/2012 Email: judith.walter@encana.com
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Attachment Check List

Att Doc Num	Name
400272832	FORM 5A SUBMITTED
400272835	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold; form 5 approved. oper. has changed well status since this form submitted to PR	10/3/2012 10:17:40 AM
Permit	On Hold pending form 5 approval.	6/18/2012 9:44:47 AM

Total: 2 comment(s)