

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 05-045-20776-00 6. County: GARFIELD 7. Well Name: Encana Fee Well Number: 19-5A (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: 03/11/2012 End Date: Date of First Production this formation: 03/19/2012 Perforations Top: 5834 Bottom: 7629 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: 76866 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: 17 Bbl oil: 0 Mcf Gas: 240 Bbl H2O: 408 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 240 Bbl H2O: 408 GOR: 0 Test Method: Flowing Casing PSI: 1625 Tubing PSI: 0 Choke Size: 20/64 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1170 API Gravity Oil: 0 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7020 Tbg setting date: 03/25/2012 Packer Depth:

Reason for Non-Production: 3/20/2012: Well Shut In to maintain our water balance at Mamm Creek, and Frac Crew availability. No tubing pressure reading as the tubing was landed after this 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: 4/17/2012 Email judith.walter@encana.com

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold; form 5 approved. form 7 reporting PR status since this form submitted.	10/3/2012 10:30:28 AM
Permit	On Hold pending form 5 approval.	6/18/2012 12:15:42 PM

Total: 2 comment(s)