

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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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 05-123-34127-00

7. Well Name: FILE

8. Location: QtrQtr: NWNE Section: 17 Township: 2N Range: 68W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 41-17

### Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED Treatment Type: \_\_\_\_\_  
Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: 12/11/2012  
Perforations Top: 7394 Bottom: 7893 No. Holes: 138 Hole size: 0.42  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

Final Tubing Information:  
Set RBP @ 7160'. 04-11-13. Released on 04-12-13  
Released additional RPB's to commingle the JSND-NBRR-CDL. 04-13-13  
Landed tubing @ 7850.48'. 04-13-13

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: 04/21/2013 Hours: 24 Bbl oil: 70 Mcf Gas: 290 Bbl H2O: 68  
Calculated 24 hour rate: Bbl oil: 70 Mcf Gas: 290 Bbl H2O: 68 GOR: 4142  
Test Method: FLOWING Casing PSI: 1255 Tubing PSI: 464 Choke Size: 16/64  
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1250 API Gravity Oil: 1  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7850 Tbg setting date: 04/13/2013 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: Sheilla D. Reed-High  
Title: Drilling and Comp. Tech Date: \_\_\_\_\_ Email: sheilla.reedhigh@Encana.com  
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#### Attachment Check List

Att Doc Num	Name
400424991	WELLBORE DIAGRAM

Total Attach: 1 Files

#### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)