

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

5. API Number 05-123-35883-00 6. County: WELD
 7. Well Name: lone Well Number: 1A-8H
 8. Location: QtrQtr: NENE Section: 8 Township: 2N Range: 66W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 02/18/2013 End Date: 02/24/2013 Date of First Production this formation: 04/27/2013

Perforations Top: 7469 Bottom: 11486 No. Holes: 1000 Hole size: 0.38

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

Stages 1-21 treated with a total of 77024 bbls fluid.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 77024 Max pressure during treatment (psi): 8355

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): 0.92

Total acid used in treatment (bbl): _____ Number of staged intervals: 21

Recycled water used in treatment (bbl): 77024 Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 3466470 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/08/2013 Hours: 24 Bbl oil: 223 Mcf Gas: 1146 Bbl H2O: 51

Calculated 24 hour rate: Bbl oil: 223 Mcf Gas: 1146 Bbl H2O: 51 GOR: 5139

Test Method: FLOWING Casing PSI: 1672 Tubing PSI: 1254 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1273 API Gravity Oil: 50

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6067 Tbg setting date: 03/11/2013 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:

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

Signed: _____ Print Name: Sheilla Reed-High

Title: Drilling and Compl. Tech. Date: _____ Email sheilla.reedhigh@Encana.com
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Attachment Check List

Att Doc Num **Name**

400471954	WELLBORE DIAGRAM
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Total Attach: 1 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)