

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:
400487189

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: Cristi Cota-Smith
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3083
 3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4083
 City: DENVER State: CO Zip: 80202-

5. API Number 05-123-36629-00 6. County: WELD
 7. Well Name: State Peterson Well Number: 2E-20H
 8. Location: QtrQtr: SWNW Section: 20 Township: 5N Range: 63W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/07/2013 End Date: 05/13/2013 Date of First Production this formation: 06/20/2013

Perforations Top: 7308 Bottom: 11306 No. Holes: 711 Hole size: 0.38

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

Stage 1 - Stage 20 treated with a total of: 72,042 bbls of Halliburton PermStim Hybrid, 3,318,244 lbs of 20/40 Proppant.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 72042 Max pressure during treatment (psi): 8218

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.93

Total acid used in treatment (bbl): _____ Number of staged intervals: 20

Recycled water used in treatment (bbl): 72042 Flowback volume recovered (bbl): 1050

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

Total proppant used (lbs): 3318244 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/29/2013 Hours: 24 Bbl oil: 263 Mcf Gas: 332 Bbl H2O: 110

Calculated 24 hour rate: Bbl oil: 263 Mcf Gas: 332 Bbl H2O: 110 GOR: 1262

Test Method: Flowing Casing PSI: 1793 Tubing PSI: 653 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1343 API Gravity Oil: 46

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6910 Tbg setting date: 06/04/2013 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: Cristi L. Cota-Smith
Title: Permitting Analyst Date: _____ Email: cristi.cota-smith@encana.com
:

Attachment Check List

| <u>Att Doc Num</u> | <u>Name</u> |
|---------------------------|--------------------|
| 400487203 | WELLBORE DIAGRAM |

Total Attach: 1 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
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Total: 0 comment(s)