

FORM  
5

Rev  
02/08

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400407586

Date Received:

04/24/2013

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type  Final completion  Preliminary 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: Marina Ayala  
Phone: (720) 876-5905  
Fax: (720) 876-6905

5. API Number 05-045-21044-00  
6. County: GARFIELD  
7. Well Name: SG  
Well Number: 8509D-21 N22496  
8. Location: QtrQtr: SESW Section: 22 Township: 4S Range: 96W Meridian: 6  
Footage at surface: Distance: 1212 feet Direction: FSL Distance: 1955 feet Direction: FWL  
As Drilled Latitude: 39.683881 As Drilled Longitude: -108.157202

GPS Data:  
Date of Measurement: 02/10/2012 PDOP Reading: 4.0 GPS Instrument Operator's Name: Brandon Birdsall

\*\* If directional footage at Top of Prod. Zone Dist.: 1801 feet. Direction: FSL Dist.: 1280 feet. Direction: FEL  
Sec: 21 Twp: 4S Rng: 96W  
\*\* If directional footage at Bottom Hole Dist.: 1796 feet. Direction: FSL Dist.: 1317 feet. Direction: FEL  
Sec: 21 Twp: 4S Rng: 96W

9. Field Name: WILDCAT 10. Field Number: 99999  
11. Federal, Indian or State Lease Number: COC62562

12. Spud Date: (when the 1st bit hit the dirt) 03/06/2012 13. Date TD: 05/06/2012 14. Date Casing Set or D&A: 05/07/2012

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 11805 TVD\*\* 11017 17 Plug Back Total Depth MD 11762 TVD\*\* 10974

18. Elevations GR 7585 KB 7607  
One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:  
CBL and Mud.

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	30	20	53	0	120	133	0	120	VISU
SURF	14+3/4	9+5/8	36	0	2,129	717	0	2,129	VISU
1ST	8+3/4	4+1/2	11.60	0	11,785	1,964	1,055	11,805	CBL

### STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

21. Formation log intervals and test zones:

#### FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WILLIAMS FORK	7,886	11,745	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	11,746	11,805	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: \_\_\_\_\_ Print Name: Marina Ayala

Title: Permitting Technician Date: 4/24/2013 Email: marina.ayala@encana.com

#### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400407612	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400407605	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400525633	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Other Attachments</u>			
400407586	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400407597	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400407603	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400407611	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

#### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Return to Draft: Requested paper CBL. Request again. 11/22/13 requested pdf of cbl. 12/2/13.  PASSES PERMITTING: CBL has been attached, 12/12/13.	10/4/2013 3:40:23 PM

Total: 1 comment(s)