

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: 400540345

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: Kelly Hamden
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5185
 3. Address: 370 17TH ST STE 1700 Fax: (720) 876-6185
 City: DENVER State: CO Zip: 80202- Email: Kelly.Hamden@encana.com

5. API Number 05-123-37440-00 6. County: WELD
 7. Well Name: Marcus State Well Number: 3F-36H (M266)
 8. Location: QtrQtr: SWSW Section: 36 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: 11/14/2013 End Date: 11/21/2013 Date of First Production this formation: 12/12/2013
 Perforations Top: 7660 Bottom: 11831 No. Holes: 867 Hole size: 0.38

Provide a brief summary of the formation treatment: Open Hole:
Frac with 667 bbls acid, 37670 bbls Slickwater, 87480 bbls Crosslink gel, 125166 bbls Total Fluid.

This formation is commingled with another formation: Yes No
 Total fluid used in treatment (bbl): 125166 Max pressure during treatment (psi): 10021
 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): 0.43
 Total acid used in treatment (bbl): 667 Number of staged intervals: 28
 Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): 2973
 Fresh water used in treatment (bbl): _____ Disposition method for flowback: DISPOSAL
 Total proppant used (lbs): 6339781 Rule 805 green completion techniques were utilized:
 Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/15/2013 Hours: 24 Bbl oil: 412 Mcf Gas: 692 Bbl H2O: 384
 Calculated 24 hour rate: Bbl oil: 412 Mcf Gas: 692 Bbl H2O: 384 GOR: 1680
 Test Method: Flows from well Casing PSI: 2451 Tubing PSI: 2161 Choke Size: 14/64
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1298 API Gravity Oil: 48
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7435 Tbg setting date: 11/30/2013 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: Kelly Hamden

Title: Permitting Analyst Date: _____ Email: Kelly.Hamden@encana.com
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Attachment Check List

Att Doc Num **Name**

400540354	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)