

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: Erin Lind
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5827
 3. Address: 370 17TH ST STE 1700 Fax: _____
 City: DENVER State: CO Zip: 80202- Email: erin.lind@encana.com

5. API Number 05-123-37509-00 6. County: WELD
 7. Well Name: State Well Number: 3G-16H
 8. Location: QtrQtr: SWSW Section: 16 Township: 3N Range: 68W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/31/2014 End Date: 04/04/2014 Date of First Production this formation: 04/16/2014

Perforations Top: 7654 Bottom: 11739 No. Holes: 927 Hole size: 0.44

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

Stage 1 - Stage 34 treated with a total of 94,650 bbls of Slickwater Frac (Chem Rock), 3,600 bbls of pump down no chemicals, 2,425,154 lbs of 40/70 proppant.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 98250 Max pressure during treatment (psi): 7953

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.88

Total acid used in treatment (bbl): 0 Number of staged intervals: 34

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 9355

Fresh water used in treatment (bbl): 0 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 2425154 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/22/2014 Hours: 24 Bbl oil: 150 Mcf Gas: 114 Bbl H2O: 174

Calculated 24 hour rate: Bbl oil: 150 Mcf Gas: 114 Bbl H2O: 174 GOR: 760

Test Method: Flows from well Casing PSI: 2752 Tubing PSI: 193 Choke Size: 10/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1298 API Gravity Oil: 50

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7381 Tbg setting date: 04/03/2014 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: Erin Lind
Title: Regulatory Analyst Date: _____ Email: erin.lind@encana.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400612786	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)