

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:  
400629260

Date Received:

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: Erin Lind  
Phone: (720) 876-5827  
Fax:

5. API Number 05-123-37789-00  
6. County: WELD  
7. Well Name: Lochbuie Well Number: 2B-31H D165  
8. Location: QtrQtr: NWNW Section: 31 Township: 1N Range: 65W Meridian: 6  
Footage at surface: Distance: 350 feet Direction: FNL Distance: 1116 feet Direction: FWL  
As Drilled Latitude: 40.014076 As Drilled Longitude: -104.712172

GPS Data:  
Date of Measurement: 06/06/2014 PDOP Reading: 3.0 GPS Instrument Operator's Name: S DOWNEY

\*\* If directional footage at Top of Prod. Zone Dist.: 506 feet. Direction: FNL Dist.: 612 feet. Direction: FWL  
Sec: 31 Twp: 1N Rng: 65W

\*\* If directional footage at Bottom Hole Dist.: 510 feet. Direction: FSL Dist.: 564 feet. Direction: FWL  
Sec: 31 Twp: 1N Rng: 65W

9. Field Name: WATTENBERG 10. Field Number: 90750  
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 11/27/2013 13. Date TD: 12/09/2013 14. Date Casing Set or D&A: 12/11/2013

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

16. Total Depth MD 12050 TVD\*\* 7507 17 Plug Back Total Depth MD 11989 TVD\*\* 7446

18. Elevations GR 5008 KB 5038  
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:  
Open hole logs were run on the Lochbuie 1 (05-123-18761), NWNW Section 31-T1N-R65W, which satisfies the COGCC request of open hole log data in a quarter-quarter section where none previously existed.

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	16	65	0	114	432	0	114	CALC
SURF	12+1/4	9+5/8	40	0	1,499	470	0	1,502	CALC
1ST	8+3/4	7	26	0	7,773	695	0	7,783	CALC
2ND	6+1/8	4+1/2	13.5	11783	12,040	365	5,549	12,050	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	
CODELL		7,778	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA		7,685	<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS		7,171	<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX		4,690	<input type="checkbox"/>	<input type="checkbox"/>	
TEEPER BUTTES		6,237	<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: Erin Lind

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: erin.lind@encana.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400629292	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400629291	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"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400629267	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400629271	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400629288	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400629294	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400629295	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

## General Comments

User Group

Comment

Comment Date

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

Total: 0 comment(s)