

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



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Document Number:
400631472

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 05-123-37786-00
6. County: WELD
7. Well Name: Lochbuie Well Number: 2D-31H D165
8. Location: QtrQtr: NWNW Section: 31 Township: 1N Range: 65W Meridian: 6
Footage at surface: Distance: 350 feet Direction: FNL Distance: 1136 feet Direction: FWL
As Drilled Latitude: 40.014082 As Drilled Longitude: -104.712095

GPS Data:
Date of Measurement: 06/04/2014 PDOP Reading: 2.8 GPS Instrument Operator's Name: DOWNEY

** If directional footage at Top of Prod. Zone Dist.: 588 feet. Direction: FNL Dist.: 1319 feet. Direction: FWL
Sec: 31 Twp: 1N Rng: 65W

** If directional footage at Bottom Hole Dist.: 460 feet. Direction: FSL Dist.: 1322 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) 12/24/2013 13. Date TD: 01/03/2014 14. Date Casing Set or D&A: 01/05/2014

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

16. Total Depth MD 12087 TVD** 7471 17 Plug Back Total Depth MD 12022 TVD** 7406

18. Elevations GR 5007 KB 5037
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	1,490	497	0	1,504	CALC
1ST	8+3/4	7	26	0	7,811	712	0	7,821	CALC
2ND	6+1/8	4+1/2	13.5	7821	12,076	304	6,810	12,087	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		7,774	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA		7,668	<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS		7,089	<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX		4,670	<input type="checkbox"/>	<input type="checkbox"/>	
TEEPPEE BUTTES		6,000	<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>			
400631489	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400631491	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>			
400631477	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400631481	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400631483	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400631490	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400631492	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

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

Total: 0 comment(s)