

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:

400645536

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 05-123-37306-00
6. County: WELD
7. Well Name: Peppler Farms
Well Number: 1D-4H
8. Location: QtrQtr: SENE Section: 4 Township: 3N Range: 68W Meridian: 6
Footage at surface: Distance: 1611 feet Direction: FNL Distance: 303 feet Direction: FEL
As Drilled Latitude: 40.258093 As Drilled Longitude: -104.999806

GPS Data:

Date of Measurement: 07/10/2014 PDOP Reading: 1.9 GPS Instrument Operator's Name: S DOWNEY

** If directional footage at Top of Prod. Zone Dist.: 1246 feet. Direction: FNL Dist.: 662 feet. Direction: FEL

Sec: 4 Twp: 3N Rng: 68W

** If directional footage at Bottom Hole Dist.: 1189 feet. Direction: FNL Dist.: 483 feet. Direction: FWL

Sec: 4 Twp: 3N Rng: 68W

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) 01/21/2014 13. Date TD: 01/29/2014 14. Date Casing Set or D&A: 01/30/2014

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 11945 TVD** 7402 17 Plug Back Total Depth MD 11929 TVD** 7386

18. Elevations GR 5057 KB 5085

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 Peppler Farms 1D-4H, 05-123-37306, SENE Section 4, T3N, R68W, which satisfies the COGCC request of open hole log data in an area 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	113	432	0	113	CALC
SURF	12+1/4	9+5/8	40	0	909	355	0	919	CALC
1ST	8+3/4	7	26	0	7,779	660	0	7,793	CALC
2ND	6+1/8	4+1/2	13.5	7793	11,933	346	6,779	11,945	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		7,691	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA		7,622	<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON		4,638	<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS		7,100	<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX		4,364	<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES		6,083	<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 ?
Attachment Checklist		
400645587	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400645590	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"/>
Other Attachments		
400645556	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400645567	PDF-INDUCTION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400645579	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400645581	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400645585	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400645592	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)