

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:  
400663001

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: Toby Sachen  
Phone: (720) 876-5845  
Fax:

5. API Number 05-123-38059-00  
6. County: WELD  
7. Well Name: McConahay Well Number: 1C-34H-H266  
8. Location: QtrQtr: SENE Section: 34 Township: 2n Range: 66w Meridian: 6  
Footage at surface: Distance: 1447 feet Direction: FNL Distance: 1115 feet Direction: FEL  
As Drilled Latitude: 40.098002 As Drilled Longitude: -104.757709

GPS Data:

Date of Measurement: 08/05/2014 PDOP Reading: 2.7 GPS Instrument Operator's Name: Scott Downey

\*\* If directional footage at Top of Prod. Zone Dist.: 2671 feet. Direction: FNL Dist.: 1203 feet. Direction: FEL

Sec: 34 Twp: 2n Rng: 66w

\*\* If directional footage at Bottom Hole Dist.: 2610 feet. Direction: FNL Dist.: 491 feet. Direction: FWL

Sec: 34 Twp: 2n Rng: 66w

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) 04/02/2014 13. Date TD: 04/12/2014 14. Date Casing Set or D&A: 04/14/2014

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 11694 TVD\*\* 7538 17 Plug Back Total Depth MD 11654 TVD\*\* 7538

18. Elevations GR 5060 KB 5073

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:

CBL, MWD

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	30	0	97	432	0	97	
SURF	12+1/4	9+5/8	40	0	1,136	461	0	1,150	
1ST	8+3/4	7	26	0	8,076	651	0	8,087	
2ND	6+1/8	4+1/2	13.5	0	11,680	375	6,076	11,694	

### 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	
SHARON SPRINGS	7,304		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,363		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,972		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Open hole logging exception granted by Diana Burn 11/21/13.  
Email correspondence attached to McConahay 1B-34H-H266 form 5.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_

Print Name: Toby Sachen

Title: Regulatory Analyst

Date:

Email: toby.sachen@encana.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400664346	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400671355	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"/>
<b>Other Attachments</b>			
400664348	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400664351	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400664352	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400664353	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400683466	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)