

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:

400684302

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 4. Contact Name: Bonnie Lamond  
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5156  
3. Address: 370 17TH ST STE 1700 Fax: \_\_\_\_\_  
City: DENVER State: CO Zip: 80202-

5. API Number 05-123-37664-00 6. County: WELD  
7. Well Name: Frederiksen Well Number: 1B-28H-A368  
8. Location: QtrQtr: NENE Section: 28 Township: 3N Range: 68W Meridian: 6  
Footage at surface: Distance: 763 feet Direction: FNL Distance: 267 feet Direction: FEL  
As Drilled Latitude: 40.202038 As Drilled Longitude: -104.999345

#### GPS Data:

Date of Measurement: 08/22/2014 PDOP Reading: 2.0 GPS Instrument Operator's Name: S. Downey

\*\* If directional footage at Top of Prod. Zone Dist.: 364 feet. Direction: FNL Dist.: 745 feet. Direction: FEL

Sec: 28 Twp: 3N Rng: 68W

\*\* If directional footage at Bottom Hole Dist.: 326 feet. Direction: FNL Dist.: 499 feet. Direction: FWL

Sec: 28 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) 03/01/2014 13. Date TD: 04/28/2014 14. Date Casing Set or D&A: \_\_\_\_\_

#### 15. Well Classification:

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

16. Total Depth MD 11784 TVD\*\* 7120 17 Plug Back Total Depth MD 11485 TVD\*\* 7120

18. Elevations GR 4995 KB 5005

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 Frederiksen 1C-28H-A368, API#05-123-37661, NENE-Sec.28-T3N-R68W

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	97	432	13	97	CALC
SURF	12+1/4	9+5/8	40	0	841	290	18	841	CALC
1ST	8+3/4	7	26	0	7,585	638	16	7,585	CALC
2ND	6+1/8	4+1/2	13.5	7585	11,564	360	7,605	11,580	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	
SUSSEX	4,021		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,550		<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES	5,571		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,107		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,251		<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: Bonnie Lamond

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: bonnie.lamond@encana.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400684579	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400684588	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"/>
400684373	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
400684321	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400684578	WELL LOCATION PLAT	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400684603	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400686663	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400686668	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400686672	LAS-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

## General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)