

FORM  
5

Rev  
09/14

# State of Colorado Oil and Gas Conservation Commission

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Document Number:  
400700858

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

OGCC Operator Number: 100185 Contact Name: Erin Lind  
Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5827  
Address: 370 17TH ST STE 1700 Fax: \_\_\_\_\_  
City: DENVER State: CO Zip: 80202-

API Number 05-123-36525-00 County: WELD  
Well Name: Billings Well Number: 2H-18H  
Location: QtrQtr: NWNW Section: 18 Township: 3N Range: 68W Meridian: 6  
Footage at surface: Distance: 1307 feet Direction: FNL Distance: 275 feet Direction: FWL  
As Drilled Latitude: 40.229217 As Drilled Longitude: -105.054129

### GPS Data:

Date of Measurement: 09/16/2014 PDOP Reading: 2.9 GPS Instrument Operator's Name: SCOTT DOWNEY

\*\* If directional footage at Top of Prod. Zone Dist.: 2444 feet. Direction: FNL Dist.: 662 feet. Direction: FWL  
Sec: 18 Twp: 3N Rng: 68W

\*\* If directional footage at Bottom Hole Dist.: 2527 feet. Direction: FNL Dist.: 2124 feet. Direction: FWL  
Sec: 17 Twp: 3N Rng: 68W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 01/10/2014 Date TD: 04/22/2014 Date Casing Set or D&A: 04/24/2014

Rig Release Date: 04/26/2014 Per Rule 308A.b.

### Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD 14390 TVD\*\* 7370 Plug Back Total Depth MD 14316 TVD\*\* 7369

Elevations GR 5198 KB 5228 Digital Copies of ALL Logs must be Attached per Rule 308A

### List Electric Logs Run:

CBL, MWD. Open hole logs were run on the Billings 22-18 (123-36620), NWNW Section 18 T3N R68W, which satisfies the COGCC request of open hole log data in a quarter-quarter section where none previously existed.

## CASING, LINER AND CEMENT

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	116	CALC
SURF	12+1/2	9+5/8	40	0	850	373	0	845	CALC
1ST	8+3/4	7	26	0	7,683	657	0	7,703	CALC
2ND	6+1/8	4+1/2	13.5	7703	14,370	566	5,315	14,390	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:

**FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
SUSSEX	3,916				
SHANNON	4,369				
TEEPEE BUTTES	5,898				
SHARON SPRINGS	6,963				
NIOBRARA	7,023				
CODELL	7,486	14,390			

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 ?	
<b>Attachment Checklist</b>			
400700887	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400700888	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>			
400700871	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400700875	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400700880	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400700882	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400700885	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400700889	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)