

Document Number:  
400740809

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 05-123-38093-00 County: WELD  
 Well Name: Grant Hurt Well Number: 1H-14H G268  
 Location: QtrQtr: SWNE Section: 14 Township: 2N Range: 68W Meridian: 6  
 Footage at surface: Distance: 2449 feet Direction: FNL Distance: 1529 feet Direction: FEL  
 As Drilled Latitude: 40.139284 As Drilled Longitude: -104.966484

GPS Data:  
 Date of Measurement: 12/04/2014 PDOP Reading: 1.9 GPS Instrument Operator's Name: CHRIS

\*\* If directional footage at Top of Prod. Zone Dist.: 1791 feet. Direction: FNL Dist.: 179 feet. Direction: FEL  
 Sec: 14 Twp: 2N Rng: 68W  
 \*\* If directional footage at Bottom Hole Dist.: 516 feet. Direction: FNL Dist.: 151 feet. Direction: FEL  
 Sec: 11 Twp: 2N Rng: 68W

Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 07/18/2014 Date TD: 10/01/2014 Date Casing Set or D&A: 10/03/2014  
 Rig Release Date: 10/04/2014 Per Rule 308A.b.

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

Total Depth MD 14375 TVD\*\* 7202 Plug Back Total Depth MD 14299 TVD\*\* 7202  
 Elevations GR 4888 KB 4918 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL, MWD. Open hole logs were run on the Grant Hurt 1G-14H.

**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	117	180	0	117	CALC
SURF	12+1/4	9+5/8	40	0	867	341	0	885	CALC
1ST	8+3/4	7	26	0	7,781	692	0	7,806	CALC
2ND	6+1/8	4+1/2	13.5	0	14,351	570	5,836	14,375	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	4,226				
SHANNON	4,754				
TEEPEE BUTTES	6,000				
SHARON SPRINGS	7,113				
NIOBRARA	7,190				

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>			
400740900	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400740897	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>			
400740869	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740872	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740887	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740892	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740929	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)