

FORM
5
Rev
09/14

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:
400728308

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: Toby Sachen
 Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5845
 Address: 370 17TH ST STE 1700 Fax: _____
 City: DENVER State: CO Zip: 80202-

API Number 05-123-38003-00 County: WELD
 Well Name: JILLSON-EAST RINN Well Number: 3H-22H-N268
 Location: QtrQtr: SESW Section: 22 Township: 2n Range: 68w Meridian: 6
 Footage at surface: Distance: 261 feet Direction: FSL Distance: 2100 feet Direction: FWL
 As Drilled Latitude: 40.117592 As Drilled Longitude: -104.991276

GPS Data:
 Date of Measurement: 10/02/2014 PDOP Reading: 2.0 GPS Instrument Operator's Name: Chris Bettencourt

** If directional footage at Top of Prod. Zone Dist.: 782 feet. Direction: FSL Dist.: 1808 feet. Direction: FWL
 Sec: 22 Twp: 2n Rng: 68w
 ** If directional footage at Bottom Hole Dist.: 2601 feet. Direction: FSL Dist.: 1733 feet. Direction: FWL
 Sec: 15 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) 06/13/2014 Date TD: 07/26/2014 Date Casing Set or D&A: 07/29/2014
 Rig Release Date: 10/13/2014 Per Rule 308A.b.

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

Total Depth MD 15221 TVD** 7763 Plug Back Total Depth MD 15201 TVD** 7643

Elevations GR 4975 KB 5000 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, MWD, Resistivity

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	30	0	107	114	0	107	
SURF	12+1/4	9+5/8	40	0	863	351	0	863	
1ST	8+3/4	7	26	0	8,073	602	0	8,073	
2ND	6+1/8	4+1/2	13.5	0	15,203	553	7,058	15,221	

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	
SHARON SPRINGS	7,278				
NIOBRARA	7,381				
FORT HAYS	7,873				
CODELL	7,951				

Comment:

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 ?	
Attachment Checklist			
400740704	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400740698	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			
400740653	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740667	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740668	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740671	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740672	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740709	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400757446	LAS-RESISTIVITY	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)