

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.

Document Number:
400780945

Date Received:

Completion Type Final completion Preliminary completion

OGCC Operator Number: 100185 Contact Name: Bonnie Lamond

Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5156

Address: 370 17TH ST STE 1700 Fax: _____

City: DENVER State: CO Zip: 80202-

API Number 05-123-39726-00 County: WELD

Well Name: Dale Well Number: 4G-20H-O264

Location: QtrQtr: SWSE Section: 20 Township: 2N Range: 64W Meridian: 6

Footage at surface: Distance: 337 feet Direction: FSL Distance: 1761 feet Direction: FEL

As Drilled Latitude: 40.117641 As Drilled Longitude: -104.571860

GPS Data:
Date of Measurement: 12/08/2014 PDOP Reading: 1.7 GPS Instrument Operator's Name: Chris Bettencourt

** If directional footage at Top of Prod. Zone Dist.: 584 feet. Direction: FSL Dist.: 1178 feet. Direction: FEL
Sec: 20 Twp: 2N Rng: 64W

** If directional footage at Bottom Hole Dist.: 508 feet. Direction: FNL Dist.: 1108 feet. Direction: FEL
Sec: 20 Twp: 2N Rng: 64W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 08/20/2014 Date TD: 10/05/2014 Date Casing Set or D&A: 10/06/2014

Rig Release Date: 12/02/2014 Per Rule 308A.b.

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

Total Depth MD 11562 TVD** 7013 Plug Back Total Depth MD 11547 TVD** 7013

Elevations GR 4958 KB 4983 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
Open hole LWD PRT (resistivity) log was run on the Dale 4E-20H-O264.

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	148	114	0	148	
SURF	12+1/4	9+5/8	40	0	1,106	371	0	1,106	
1ST	8+3/4	7	26	0	7,363	579	0	7,363	
2ND	6+1/8	4+1/2	13.5	0	11,547	352	6,190	11,547	

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	6,926				
NIOBRARA	6,985				

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 ?	
Attachment Checklist			
400781262	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400784070	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			
400781255	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400781259	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400781260	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400781266	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400783158	LAS-MEASUREMENT/LOGGING WHILE DRILLING	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)