

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:
400800187

Date Received:

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 05-123-36984-00 County: WELD

Well Name: Billings Well Number: 3C-18H L368

Location: QtrQtr: NWSW Section: 18 Township: 3N Range: 68W Meridian: 6

Footage at surface: Distance: 1620 feet Direction: FSL Distance: 952 feet Direction: FWL

As Drilled Latitude: _____ As Drilled Longitude: _____

GPS Data:

Date of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** If directional footage at Top of Prod. Zone Dist.: 1880 feet. Direction: FSL Dist.: 896 feet. Direction: FWL

Sec: 18 Twp: 3N Rng: 68W

** If directional footage at Bottom Hole Dist.: 1810 feet. Direction: FSL Dist.: 2128 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) 10/11/2014 Date TD: 11/08/2014 Date Casing Set or D&A: 11/10/2014

Rig Release Date: 12/30/2014 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 14025 TVD** 7126 Plug Back Total Depth MD 13960 TVD** 7126

Elevations GR 5155 KB 5185 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:

CBL, MWD. An open hole log omission request was granted for this pad.

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 | 155 | 160 | 0 | 156 | CALC |
| SURF | 12+1/4 | 9+5/8 | 40 | 0 | 869 | 372 | 0 | 869 | CALC |
| 1ST | 8+3/4 | 7 | 26 | 0 | 7,537 | 660 | 0 | 7,555 | CALC |
| 2ND | 6+1/8 | 4+1/2 | 13.5 | 0 | 14,010 | 617 | 5,537 | 14,025 | 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 | |
| NIOBRARA | 7,067 | | | | |

Comment:

As-built coordinates were unable to be collected at this time due to the completions crew currently on site. These coordinates will be submitted via sundry as soon as possible.

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 ? | |
|-----------------------------|----------------------------------------|-----------------------------------------|----------------------------------------|
| Attachment Checklist | | | |
| 400800224 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400800228 | 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 | | | |
| 400800202 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400800208 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400800211 | LAS-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400800218 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400800231 | DIRECTIONAL DATA | 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)