

FORM
5Rev
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



DE ET OE ES

Document Number:

400817324

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 05-123-39775-00

County: WELD

Well Name: Newnam

Well Number: 2A-32H C264

Location: QtrQtr: NENW Section: 32 Township: 2N Range: 64W Meridian: 6

Footage at surface: Distance: 307 feet Direction: FNL Distance: 1547 feet Direction: FWL

As Drilled Latitude: 40.101468 As Drilled Longitude: -104.578710

GPS Data:

Date of Measurement: 03/11/2015 PDOP Reading: 1.9 GPS Instrument Operator's Name: CHRIS

** If directional footage at Top of Prod. Zone Dist.: 725 feet. Direction: FNL Dist.: 26 feet. Direction: FWL

Sec: 32 Twp: 2N Rng: 64W

** If directional footage at Bottom Hole Dist.: 502 feet. Direction: FSL Dist.: 35 feet. Direction: FWL

Sec: 32 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) 10/18/2014 Date TD: 10/25/2014 Date Casing Set or D&A: 10/26/2014

Rig Release Date: 02/21/2015 Per Rule 308A.b.

Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 11700 TVD** 7012 Plug Back Total Depth MD 11633 TVD** 7012

Elevations GR 4952 KB 4965 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MWD. Open hole logs were run on the Newnam 2C-32H C264 well.

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	133	145	0	133	CALC
SURF	12+1/4	9+5/8	40	0	1,027	432	0	1,040	CALC
1ST	8+3/4	7	26	0	7,603	672	0	7,615	CALC
2ND	6+1/8	4+1/2	13.5	0	11,685	401	5,605	11,700	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	
SHARON SPRINGS	7,160				
NIOBRARA	7,218				

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 ?			
<u>Attachment Checklist</u>					
400817379	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400817381	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"/>
<u>Other Attachments</u>					
400817361	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400817374	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400817377	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400817378	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400817382	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)