

FORM
5ARev
06/12

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:

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Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100185 4. Contact Name: Chris McRickard
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5586
 3. Address: 370 17TH ST STE 1700 Fax: (720) 876-6584
 City: DENVER State: CO Zip: 80202- Email: chris.mcrickard@encana.com

5. API Number 05-123-40276-00 6. County: WELD
 7. Well Name: Ruhl Well Number: 1J-32H-B264
 8. Location: QtrQtr: NWNE Section: 32 Township: 2N Range: 64W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATIONTreatment Date: 04/21/2015 End Date: 04/26/2015 Date of First Production this formation: _____Perforations Top: 7572 Bottom: 11439 No. Holes: 754 Hole size: 0.38Provide a brief summary of the formation treatment: Open Hole: ☒

All formations produced from Niobrara. Total fluids of 79,438 bbls comprised of fresh water, recycled water, additives & acid. Total of 4,785,660 lbs of 40/70 sand was pumped.

This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 79438Max pressure during treatment (psi): 8860

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: _____

Min frac gradient (psi/ft): 0.91Total acid used in treatment (bbl): 678Number of staged intervals: 28Recycled water used in treatment (bbl): 10743Flowback volume recovered (bbl): 10743Fresh water used in treatment (bbl): 68017Disposition method for flowback: DISPOSALTotal proppant used (lbs): 4785660Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/23/2015 Hours: 24 Bbl oil: 106 Mcf Gas: 87 Bbl H2O: 477Calculated 24 hour rate: Bbl oil: 106 Mcf Gas: 87 Bbl H2O: 477 GOR: 820Test Method: Flowing Casing PSI: 1702 Tubing PSI: 1038 Choke Size: 14Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1298 API Gravity Oil: 50Tubing Size: 2 + 3/8 Tubing Setting Depth: 7149 Tbg setting date: 05/16/2015 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

Comment:

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I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Chris McRickard

Title: Regulatory Analyst

Date: _____

Email: chris.mcrickard@encana.com

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Attachment Check List

Att Doc Num

Name

400853860

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)