

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



DE ET OE ES

Document Number:
400865732

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: 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 05-123-39274-00 County: WELD
Well Name: Sprague Well Number: 3F-9H-N267
Location: QtrQtr: SESW Section: 9 Township: 2N Range: 67W Meridian: 6
Footage at surface: Distance: 521 feet Direction: FSL Distance: 1727 feet Direction: FWL
As Drilled Latitude: 40.147016 As Drilled Longitude: -104.898449

GPS Data:
Date of Measurement: 07/10/2015 PDOP Reading: 1.1 GPS Instrument Operator's Name: Jason Dahlman

** If directional footage at Top of Prod. Zone Dist.: 704 feet. Direction: FSL Dist.: 1741 feet. Direction: FWL
Sec: 9 Twp: 2N Rng: 67W

** If directional footage at Bottom Hole Dist.: 422 feet. Direction: FSL Dist.: 1856 feet. Direction: FWL
Sec: 9 Twp: 2N Rng: 67W

Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 03/18/2015 Date TD: 03/27/2015 Date Casing Set or D&A: 03/28/2015
Rig Release Date: 05/14/2015 Per Rule 308A.b.

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

Total Depth MD 12985 TVD** 7536 Plug Back Total Depth MD 12960 TVD** 7536

Elevations GR 4982 KB 5010 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
The request to omit open-hole logging was granted for the Sprague 9H-N267 wells. The Sprague 24-9 has acceptable logs to adequately describe the stratigraphy.

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	42	0	30	110	0	30	
SURF	12+1/4	9+5/8	36	0	851	358	0	851	
1ST	8+3/4	7	26	0	7,974	736	0	7,974	
2ND	6+1/8	4+1/2	13.5	0	12,965	462	5,063	12,985	

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	7,304				
NIOBRARA	7,358				
FORT HAYS	7,851				
CODELL	8,006				

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			
400866312	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400866314	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			
400866301	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400866307	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400866308	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400866310	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400866315	DIRECTIONAL DATA	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)