<table>
<tr><td>FORM 5
Rev 09/14</td><td colspan="2">State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109
DRILLING COMPLETION REPORT</td><td>DE | ET | OE | ES
Document Number:
400999884
Date Received:</td></tr>
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| FORM 5 Rev 09/14 | DE | ET | OE | ES |

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109

DRILLING COMPLETION REPORT

Document Number:

400999884

Date Received:

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

Name of Operator: ENCANA OIL & GAS (USA) INC

Address: 370 17TH ST STE 1700

City: DENVER   State: CO   Zip: 80202-

Contact Name: Miracle Pfister

Phone: (720) 876-3761

Fax:

API Number: 05-045-14654-00   County: GARFIELD

Well Name: COUEY   Well Number: 24-12 (H23W)

Location: QtrQtr: SENE   Section: 23   Township: 7S   Range: 93W   Meridian: 6

Footage at surface: Distance: 2478 feet Direction: FNL   Distance: 142 feet Direction: FEL

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.:   feet. Direction: Dist.:   feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole   Dist.:   feet. Direction: Dist.:   feet. Direction:

Sec: Twp: Rng:

Field Name: MAMM CREEK   Field Number: 52500

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/16/2007 Date TD: Date Casing Set or D&A:

Rig Release Date: 01/01/2008 Per Rule 308A.b.

Well Classification:

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

| Total Depth | MD 8318 | TVD** | Plug Back Total Depth | MD | TVD** |

| Elevations | GR 6549 | KB 6568 | **Digital Copies of ALL Logs must be Attached per Rule 308A** ☐ |

List Electric Logs Run:

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
1ST	7+7/8	4+1/5	0	0	8,298	560	5,302	8,318	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date:

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
NON CEMENT SQUEEZE	1ST	0	0	2,190	2,201
NON CEMENT SQUEEZE	1ST	0	0	2,320	2,332
NON CEMENT SQUEEZE	1ST	0	0	3,066	3,108
NON CEMENT SQUEEZE	1ST	0	0	3,470	3,502

Details of work:

Encana performed a casing patch on the production casing by adding 4 X-span casing patches by using wireline to ensure exact placement. The top and bottom listed above is the top and bottom of the casing patch.

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	

Comment:

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

Signed: _____   Print Name: Miracle Pfister

Title: Regulatory Manager   Date: _____   Email: miracle.pfister@encana.com

Attachment Check List

Att Doc Num	Document Name		attached ?	

Attachment Checklist

	CMT Summary *	Yes ☐	No ☒
	Core Analysis	Yes ☐	No ☒
	Directional Survey **	Yes ☐	No ☒
	DST Analysis	Yes ☐	No ☒
	Logs	Yes ☐	No ☒
	Other	Yes ☐	No ☒

Other Attachments

401003479	WELLBORE DIAGRAM	Yes ☒	No ☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)