

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



Document Number:

400863826

Date Received:

07/20/2015

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type  Final completion  Preliminary completion

OGCC Operator Number: 100185 Contact Name: Toby Sachen  
Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5845  
Address: 370 17TH ST STE 1700 Fax:  
City: DENVER State: CO Zip: 80202-

API Number 05-123-20896-00 County: WELD  
Well Name: SELTZER Well Number: 43-34 J  
Location: QtrQtr: NESE Section: 34 Township: 1N Range: 67W Meridian: 6  
Footage at surface: Distance: 1780 feet Direction: FSL Distance: 460 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: WATTENBERG Field Number: 90750  
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/23/2002 Date TD: 05/28/2002 Date Casing Set or D&A:  
Rig Release Date: Per Rule 308A.b.

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

Total Depth MD 8342 TVD\*\* Plug Back Total Depth MD 8300 TVD\*\*

Elevations GR 5036 KB 5053 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:  
CBL

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
SURF	12+1/4	8+5/8	24	0	1,072	395	0	1,072	VISU
1ST	7+7/8	4+1/2	11.6	0	8,342	245	7,230	8,342	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 07/02/2015

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	7,215	200	6,374	7,090
STAGE TOOL	1ST	5,610	336	4,280	5,620

Details of work:

CBL only logged to 7090'; cement may go lower.

### 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	

Operator Comments

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

Signed: \_\_\_\_\_ Print Name: Toby Sachen

Title: Regulatory Analyst Date: 7/20/2015 Email: toby.sachen@encana.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400863831	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" 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>			
400863826	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400863827	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400871103	WELLBORE DIAGRAM	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)