

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:

400789656

Date Received:

02/13/2015

## 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: Erin Lind  
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5827  
 3. Address: 370 17TH ST STE 1700 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202- Email: erin.lind@encana.com

5. API Number 05-123-38071-00 6. County: WELD  
 7. Well Name: Edith Ann-Duckworth Well Number: 4C-21H O268  
 8. Location: QtrQtr: SWSE Section: 21 Township: 2N Range: 68W Meridian: 6  
 9. Field Name: WATTENBERG Field Code: 90750

## Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION  
 Treatment Date: 11/09/2014 End Date: 11/18/2014 Date of First Production this formation: 01/14/2015  
 Perforations Top: 7837 Bottom: 16655 No. Holes: 1560 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

Stages 1 - 49 treated with a total of 163,071 bbls of fresh water, 614 bbls of HCL 15%, 937 bbls of Slickwater, 2,728,940 lbs of 30/50 Sand Proppant, and 8,082,711 lbs of 40/70 Sand Proppant

This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 164622Max pressure during treatment (psi): 8540Total gas used in treatment (mcf): 0Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: \_\_\_\_\_

Min frac gradient (psi/ft): 0.84Total acid used in treatment (bbl): 614Number of staged intervals: 49Recycled water used in treatment (bbl): 0Flowback volume recovered (bbl): 4470Fresh water used in treatment (bbl): 164008Disposition method for flowback: DISPOSALTotal proppant used (lbs): 10811651Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: \_\_\_\_\_

Fracture stimulations must be reported on [FracFocus.org](http://FracFocus.org)

## Test Information:

Date: 02/08/2015 Hours: 24 Bbl oil: 336 Mcf Gas: 731 Bbl H2O: 0  
 Calculated 24 hour rate: Bbl oil: 336 Mcf Gas: 731 Bbl H2O: 0 GOR: 2176  
 Test Method: Flows from well Casing PSI: 2310 Tubing PSI: 2123 Choke Size: \_\_\_\_\_  
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1298 API Gravity Oil: 50  
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7503 Tbg setting date: 12/19/2014 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:

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: 2/13/2015 Email erin.lind@encana.com  
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### **Attachment Check List**

**Att Doc Num**      **Name**

400789656	FORM 5A SUBMITTED
400789684	WELLBORE DIAGRAM

Total Attach: 2 Files

### **General Comments**

**User Group**      **Comment**      **Comment Date**

Permit	<ul style="list-style-type: none"><li>• Added "slickwater" to formation treatment summary.</li><li>• Permitting review complete/passed task.</li></ul>	04/15/2017
Permit	<ul style="list-style-type: none"><li>• Missing fluid type, requesting additional information on the type of additives used in this treatment.</li></ul>	11/04/2016

Total: 2 comment(s)