

FORM  
5A

Rev  
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:

400791766

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

5. API Number 05-123-38081-00  
6. County: WELD  
7. Well Name: Edith Ann-Duckworth  
Well Number: 4D-21H O268  
8. Location: QtrQtr: SWSE Section: 21 Township: 2N Range: 68W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL-FORT HAYS Status: PRODUCING Treatment Type: FRACTURE STIMULATION  
Treatment Date: 10/16/2014 End Date: 10/28/2014 Date of First Production this formation: 01/14/2015  
Perforations Top: 7654 Bottom: 17077 No. Holes: 1629 Hole size: 0.44

Provide a brief summary of the formation treatment:

Open Hole: ☐

Stages 1 - 51 treated with a total of: 98,683 bbls of fresh water, 581 bbls of slickwater, and 6,021,650 lbs of 40/70 Sand Proppant

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 99264

Max pressure during treatment (psi): 7663

Total gas used in treatment (mcf): 0

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

Type of gas used in treatment:

Min frac gradient (psi/ft): 0.85

Total acid used in treatment (bbl): 0

Number of staged intervals: 51

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 2015

Fresh water used in treatment (bbl): 99264

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 6021650

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 02/08/2015 Hours: 24 Bbl oil: 233 Mcf Gas: 528 Bbl H2O: 0  
Calculated 24 hour rate: Bbl oil: 233 Mcf Gas: 528 Bbl H2O: 0 GOR: 2266  
Test Method: Flows from well Casing PSI: 2218 Tubing PSI: 1767 Choke Size: 0  
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1298 API Gravity Oil: 50  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7616 Tbg setting date: 01/01/2015 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.

FORMATION: CODELL		Status: COMMINGLED		Treatment Type: _____	
Treatment Date: _____		End Date: _____		Date of First Production this formation: _____	
Perforations	Top: _____	Bottom: _____	No. Holes: _____	Hole size: _____	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Formation Intervals: 7,954 - 10,895, 11,341 - 12,488, & 13,333 - 17,077					
This formation is commingled with another formation:			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Total fluid used in treatment (bbl): _____			Max pressure during treatment (psi): _____		
Total gas used in treatment (mcf): _____			Fluid density at initial fracture (lbs/gal): _____		
Type of gas used in treatment: _____			Min frac gradient (psi/ft): _____		
Total acid used in treatment (bbl): _____			Number of staged intervals: _____		
Recycled water used in treatment (bbl): _____			Flowback volume recovered (bbl): _____		
Fresh water used in treatment (bbl): _____			Disposition method for flowback: _____		
Total proppant used (lbs): _____			Rule 805 green completion techniques were utilized: <input type="checkbox"/>		
Reason why green completion not utilized: _____					
<b>Fracture stimulations must be reported on FracFocus.org</b>					
<b><u>Test Information:</u></b>					
Date: _____	Hours: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____	
Calculated 24 hour rate: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____	GOR: _____	
Test Method: _____	Casing PSI: _____	Tubing PSI: _____	Choke Size: _____		
Gas Disposition: _____	Gas Type: _____	Btu Gas: _____	API Gravity Oil: _____		
Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____		
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
Date formation Abandoned: _____	Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____			
** Bridge Plug Depth: _____	** Sacks cement on top: _____	** Wireline and Cement Job Summary must be attached.			

FORMATION: FORT HAYS Status: COMMINGLED Treatment Type: \_\_\_\_\_  
Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: \_\_\_\_\_  
Perforations Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ No. Holes: \_\_\_\_\_ Hole size: \_\_\_\_\_  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

Formation Intervals : 10,942 - 11,293 & 12,536 - 13,289.

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): \_\_\_\_\_ Max pressure during treatment (psi): \_\_\_\_\_  
Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): \_\_\_\_\_  
Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): \_\_\_\_\_  
Total acid used in treatment (bbl): \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_  
Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): \_\_\_\_\_  
Fresh water used in treatment (bbl): \_\_\_\_\_ Disposition method for flowback: \_\_\_\_\_  
Total proppant used (lbs): \_\_\_\_\_ Rule 805 green completion techniques were utilized: ☐

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

**Fracture stimulations must be reported on FracFocus.org**

**Test Information:**

Date: \_\_\_\_\_ Hours: \_\_\_\_\_ Bbl oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbl H2O: \_\_\_\_\_  
Calculated 24 hour rate: \_\_\_\_\_ Bbl oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbl H2O: \_\_\_\_\_ GOR: \_\_\_\_\_  
Test Method: \_\_\_\_\_ Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ Btu Gas: \_\_\_\_\_ API Gravity Oil: \_\_\_\_\_  
Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ 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:**

The intervals for the Codell formation are: 7,954 - 10,895, 11,341 - 12,488, & 13,333 - 17,077. The intervals for the Fort Hayes formation are 10,942 - 11,293 & 12,536 - 13,289.

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
400791766	FORM 5A SUBMITTED
400791775	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
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>• Commingled Panel : Formation commingled with another formation "No".</li><li>• Codell Panel : Removed Treatment Type, start date &amp; end date, first production date, perforation top &amp; bottom, # holes, size of holes, Revised fluid totals and proppant totals from fields. (All data is captured on the commingled panel)</li><li>• Codell Panel : Added Formation Intervals.</li><li>• Fort Hays Panel : Added Formation Intervals.</li><li>• Commingled Panel : Missing fluid type, requesting additional information on the type of additives used in this treatment.</li></ul>	11/04/2016
Permit	Returned to draft, per operator request.	03/02/2015

Total: 3 comment(s)