

Document Number:
 400215864

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

1. OGCC Operator Number: 100185 4. Contact Name: Heather Mitchell
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3070
 3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4070
 City: DENVER State: CO Zip: 80202-

5. API Number 05-045-18871-00 6. County: GARFIELD
 7. Well Name: N. Parachute Well Number: WF05D-22 K22 59
 8. Location: QtrQtr: NESW Section: 22 Township: 5S Range: 96W Meridian: 6
 Footage at surface: Distance: 2163 feet Direction: FSL Distance: 1707 feet Direction: FWL
 As Drilled Latitude: 39.599318 As Drilled Longitude: -108.158709

GPS Data:
 Date of Measurement: 01/07/2010 PDOP Reading: 2.8 GPS Instrument Operator's Name: Ben Johnson

** If directional footage at Top of Prod. Zone Dist.: 2417 feet. Direction: FNL Dist.: 560 feet. Direction: FWL
 Sec: 22 Twp: 5S Rng: 96W
 ** If directional footage at Bottom Hole Dist.: 2433 feet. Direction: FNL Dist.: 555 feet. Direction: FWL
 Sec: 22 Twp: 5S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 06/12/2010 13. Date TD: 07/23/2010 14. Date Casing Set or D&A: 07/25/2011

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

16. Total Depth MD 9104 TVD** 8908 17 Plug Back Total Depth MD 9053 TVD** 8857

18. Elevations GR 6527 KB 6527 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:
RST, CBL & Mud

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	Linepipe	0	120		0	120	CALC
SURF	12+1/4	9+5/8	36	0	1,652	367	0	1,652	CALC
2ND	8+3/4	4+1/2	12	0	9,084	1,294	1,963	9,085	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WILLIAMS FORK	5,427	8,878	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,879	9,104	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

CBL & RST in the same file
TOG 5487

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

Signed: _____ Print Name: Heather Mitchell

Title: Regulatory Analyst Date: _____ Email: heather.mitchell@encana.com

The subreport 'subreport3' could not be found at the specified location W:\inetpub\Net\Reports\AttachListNew.rdlc. Please

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)