

**FORM
5A**
Rev
02/08

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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COMPLETED INTERVAL REPORT

Document Number:

2286031

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: <u>100185</u>	4. Contact Name: <u>JANE WASHBURN</u>
2. Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(720) 876-5431</u>
3. Address: <u>370 17TH ST STE 1700</u>	Fax: <u>(720) 876-6431</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</u>	

5. API Number <u>05-123-27374-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>ECHEVERRIA</u>	Well Number: <u>2-0-2</u>
8. Location: QtrQtr: <u>NWNW</u> Section: <u>2</u> Township: <u>2N</u> Range: <u>67W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: J SAND Status: TEMPORARILY ABANDONED

Treatment Date: _____ Date of First Production this formation: _____

Perforations Top: 7810 Bottom: 7852 No. Holes: 60 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

CIBP SET AT 7425' on 7/13/11. J-SAND IS SI TO TEST THE NBRR-CD FORMATION.

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls 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: _____

J-SAND IS SI TO TEST THE NBRR-CD FORMATION.

Date formation Abandoned: 07/13/2011 Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: 7425 Sacks cement on top: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 07/13/2011 Date of First Production this formation: _____

Perforations Top: 7158 Bottom: 7386 No. Holes: 96 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

NIOBRARA REFRAC 7158-7174' FRAC'D W/249,420# SAND IN 137,307 GAL FRAC FLUID (7/13/11) CODELL REFRAC 7370-7386'. FRAC'D W/252,600 SAND IN 132,006 GAL FRAC FLUID (7/13/11). CIBP SET AT 7425' ON 7/13/11. CFP SET @ 7210 ON 7/13/11; DRILLED OUT 7/30/11.

This formation is commingled with another formation: Yes No

Test Information:

Date: 08/07/2011 Hours: 8 Bbls oil: 25 Mcf Gas: 145 Bbls H2O: 7

Calculated 24 hour rate: _____ Bbls oil: 75 Mcf Gas: 435 Bbls H2O: 21 GOR: 5800

Test Method: FLOWING Casing PSI: 1035 Tubing PSI: 698 Choke Size: _____

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1 API Gravity Oil: 47

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7358 Tbg setting date: 08/02/2011 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: _____

Comment: _____

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

Signed: _____ Print Name: JANE WASHBURN

Attachment Check List

Att Doc Num	Name
2286031	FORM 5A SUBMITTED
2286032	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date
Permit	Corrected the perms for the J Sand to 7810-7852'. Changed status on the J Sand from SI to TA.	1/25/2012 3:29:41 PM
Permit	Requesting confirmation on top perms for J Sand. Same as Niobrara. Change SI to TA and added date.	12/29/2011 4:17:07 PM

Total: 2 comment(s)