

**DRILLING COMPLETION REPORT**

Document Number:  
400799815

Date Received:

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

OGCC Operator Number: 100185 Contact Name: Erin Lind  
 Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5827  
 Address: 370 17TH ST STE 1700 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202-

API Number 05-123-36983-00 County: WELD  
 Well Name: Billings Well Number: 3A-18H L368  
 Location: QtrQtr: NWSW Section: 18 Township: 3N Range: 68W Meridian: 6  
 Footage at surface: Distance: 1640 feet Direction: FSL Distance: 952 feet Direction: FWL  
 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.: 2467 feet. Direction: FSL Dist.: 854 feet. Direction: FWL  
 Sec: 18 Twp: 3N Rng: 68W  
 \*\* If directional footage at Bottom Hole Dist.: 2506 feet. Direction: FSL Dist.: 2127 feet. Direction: FWL  
 Sec: 17 Twp: 3N Rng: 68W

Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 10/12/2014 Date TD: 10/22/2014 Date Casing Set or D&A: 10/24/2014  
 Rig Release Date: 12/30/2014 Per Rule 308A.b.

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

Total Depth MD 14040 TVD\*\* 7065 Plug Back Total Depth MD 13970 TVD\*\* 7065

Elevations GR 5146 KB 5176 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
 CBL, MWD. An open hole log omission request was granted for this pad.

**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
CONDUCTOR	30	16	65	0	157	160	0	155	CALC
SURF	12+1/4	9+5/8	40	0	862	372	0	880	CALC
1ST	8+3/4	7	26	0	7,519	667	0	7,540	CALC
2ND	6+1/8	4+1/2	13.5	0	14,021	613	4,288	14,040	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

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

Details of work:

## 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	
SHARON SPRINGS	7,043				
NIOBRARA	7,143				

Comment:

As-built coordinates were unable to be collected at this time due to the completions crew currently on site. These coordinates will be submitted via sundry as soon as possible.

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: \_\_\_\_\_ Email: erin.lind@encana.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400799847	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400799851	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input 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"/>
<b>Other Attachments</b>			
400799836	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400799837	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400799839	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400799841	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400799853	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

**User Group**

**Comment**

**Comment Date**

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

Total: 0 comment(s)