

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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Document Number:

400099654

**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: 100322  
2. Name of Operator: NOBLE ENERGY INC  
3. Address: 1625 BROADWAY STE 2200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Justin Garrett  
Phone: (303) 228-4449  
Fax: (303) 228-4286

5. API Number 05-123-22179-00  
6. County: WELD  
7. Well Name: DONOVAN D  
Well Number: 2-6JI  
8. Location: QtrQtr: SENW Section: 2 Township: 3N Range: 64W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 06/03/2010 Date of First Production this formation: 05/23/2005  
Perforations Top: 6833 Bottom: 6843 No. Holes: 40 Hole size:           

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

Codell refrac  
The Codell is producing through a composite flow through plug  
Frac'd Codell w/ 139216 gals pHaserFrac, Acid, FA Acid, and Slick Water with 246200 lbs Ottawa sand

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:

Date formation Abandoned:            Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt           

Bridge Plug Depth:            Sacks cement on top:

FORMATION: <u>NIOBRARA-CODELL</u>				Status: <u>PRODUCING</u>	
Treatment Date: <u>06/03/2010</u>		Date of First Production this formation: <u>06/05/2010</u>			
Perforations	Top: <u>6572</u>	Bottom: <u>6843</u>	No. Holes: <u>84</u>	Hole size: <u>          </u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Codell and Niobrara are commingled					
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>Test Information:</b>					
Date: <u>06/11/2010</u>	Hours: <u>24</u>	Bbls oil: <u>25</u>	Mcf Gas: <u>215</u>	Bbls H2O: <u>25</u>	
Calculated 24 hour rate:		Bbls oil: <u>25</u>	Mcf Gas: <u>215</u>	Bbls H2O: <u>25</u>	GOR: <u>8600</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>450</u>	Tubing PSI: <u>0</u>	Choke Size: <u>12/64</u>		
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	BTU Gas: <u>1371</u>	API Gravity Oil: <u>56</u>		
Tubing Size: <u>          </u>	Tubing Setting Depth: <u>          </u>	Tbg setting date: <u>          </u>	Packer Depth: <u>          </u>		
Reason for Non-Production:					
Date formation Abandoned: <u>          </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u>          </u>		
Bridge Plug Depth: <u>          </u>		Sacks cement on top: <u>          </u>			

FORMATION: <u>NIOBRARA</u>				Status: <u>COMMINGLED</u>	
Treatment Date: <u>06/03/2010</u>		Date of First Production this formation: <u>06/05/2010</u>			
Perforations	Top: <u>6572</u>	Bottom: <u>6636</u>	No. Holes: <u>44</u>	Hole size: <u>73/100</u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Niobrara recomplete Frac'd Niobrara w/ 249660 gals pHaserFrac and Slick Water with 249660 lbs Ottawa sand					
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Test Information:</b>					
Date: <u>          </u>	Hours: <u>          </u>	Bbls oil: <u>          </u>	Mcf Gas: <u>          </u>	Bbls H2O: <u>          </u>	
Calculated 24 hour rate:		Bbls oil: <u>          </u>	Mcf Gas: <u>          </u>	Bbls H2O: <u>          </u>	GOR: <u>          </u>
Test Method: <u>          </u>	Casing PSI: <u>          </u>	Tubing PSI: <u>          </u>	Choke Size: <u>          </u>		
Gas Disposition: <u>          </u>	Gas Type: <u>          </u>	BTU Gas: <u>          </u>	API Gravity Oil: <u>          </u>		
Tubing Size: <u>          </u>	Tubing Setting Depth: <u>          </u>	Tbg setting date: <u>          </u>	Packer Depth: <u>          </u>		
Reason for Non-Production:					
Date formation Abandoned: <u>          </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u>          </u>		
Bridge Plug Depth: <u>          </u>		Sacks cement on top: <u>          </u>			

Comment:

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

Signed: \_\_\_\_\_

Print Name: Justin Garrett

Title: Regulatory Specialist

Date: \_\_\_\_\_

Email: JDGarrett@nobleenergyinc.com

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Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_

**Director of COGCC**

Date: \_\_\_\_\_