

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



DE ET OE ES

Document Number:

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

5. API Number 05-123-14964-00 6. County: WELD
7. Well Name: MILE HIGH TURKEY Well Number: 2-2K
8. Location: QtrQtr: NWNE Section: 2 Township: 3N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 07/01/2010 Date of First Production this formation: 05/11/1991
Perforations Top: 7302 Bottom: 7317 No. Holes: 90 Hole size:

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

Codell Trifrac
Frac'd Codell w/ 128078 gals Vistar and Slick Water with 243000 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> 07/01/2010 </u>		Date of First Production this formation: <u> 05/11/1991 </u>			
Perforations	Top: <u> 7019 </u>	Bottom: <u> 7317 </u>	No. Holes: <u> 118 </u>	Hole size: <u> </u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Codell & Niobrara are commingled Nothing new happened to Niobrara during Codell trfrac					
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Test Information:					
Date: <u> 08/20/2010 </u>	Hours: <u> 24 </u>	Bbls oil: <u> 6 </u>	Mcf Gas: <u> 125 </u>	Bbls H2O: <u> 3 </u>	
Calculated 24 hour rate:		Bbls oil: <u> 6 </u>	Mcf Gas: <u> 125 </u>	Bbls H2O: <u> 3 </u>	GOR: <u> 20833 </u>
Test Method: <u> Flowing </u>	Casing PSI: <u> 532 </u>	Tubing PSI: <u> 511 </u>	Choke Size: <u> 30/64 </u>		
Gas Disposition: <u> SOLD </u>	Gas Type: <u> WET </u>	BTU Gas: <u> 1305 </u>	API Gravity Oil: <u> 61 </u>		
Tubing Size: <u> 2 + 3/8 </u>	Tubing Setting Depth: <u> 7289 </u>	Tbg setting date: <u> 07/07/2010 </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

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: _____