

**FORM  
5**Rev  
02/08State 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:

2511174

**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: 100322 4. Contact Name: EILEEN ROBERTS  
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330  
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286  
City: DENVER State: CO Zip: 80202

5. API Number 05-013-06594-00 6. County: BOULDER  
7. Well Name: LYN USX MC Well Number: 05-05  
8. Location: QtrQtr: SWNW Section: 5 Township: 1N Range: 69W Meridian: 6  
Footage at surface: Direction: FNL Distance: 1928 Direction: FWL Distance: 636  
As Drilled Latitude: 40.081857 As Drilled Longitude: -105.147908

## GPS Data:

Data of Measurement: 07/27/2010 PDOP Reading: 4.9 GPS Instrument Operator's Name: PAUL TAPPY

## \*\* If directional footage

at Top of Prod. Zone Distance: \_\_\_\_\_ Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_  
at Bottom Hole Distance: \_\_\_\_\_ Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ Direction: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 09/30/2009 13. Date TD: 10/07/2009 14. Date Casing Set or D&A: 10/09/2009

## 15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 8452 TVD \_\_\_\_\_ 17 Plug Back Total Depth MD 8933 TVD \_\_\_\_\_18. Elevations GR 5380 KB 5393

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:

CBL/GR/CCL, SDL/DSNL.ACL/TRL, CSL/NGRL

## 20. Casing, Liner and Cement:

### CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Top	Cement Bot	Status
SURF	12+1/4	8+5/8		786	266	0	798	
1ST	7+7/8	4+1/2		8,445	940	1,206	8,445	

### ADDITIONAL CEMENT

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

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	
NIOBRARA	7,471		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,817		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,834		<input type="checkbox"/>	<input type="checkbox"/>	
MOWRY	8,256		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,301		<input type="checkbox"/>	<input type="checkbox"/>	

Comment: \_\_\_\_\_

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

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

Print Name: EILEEN ROBERTS

Title: REGULATORY SPECIALIST Date: 7/28/2010 Email: EROBERTS@NOBLEENERGYINC.COM

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

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

Director of COGCC

Date: 11/19/2010

### Attachment Check List

Att Doc Num	Name
2511174	FORM 5 SUBMITTED
2511175	CEMENT JOB SUMMARY

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	LAS 700069073 DENSITY/NUETRON LAS 700069078 CBL	11/19/2010 11:56:54 AM

Total: 1 comment(s)