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: 400097339

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: Eileen Roberts
Phone: (303) 2284330
Fax: (303) 2284286

5. API Number 05-123-30948-00
6. County: WELD
7. Well Name: Horse Iron P
Well Number: 22-31D
8. Location: QtrQtr: SENE Section: 21 Township: 3N Range: 67W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: 08/05/2010 Date of First Production this formation: 08/06/2010

Perforations Top: 7084 Bottom: 7770 No. Holes: 204 Hole size: 0

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

Commingle Codell / Niobrara / J-Sand

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 08/13/2010 Hours: 24 Bbls oil: 6 Mcf Gas: 11 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 6 Mcf Gas: 11 Bbls H2O: 0 GOR: 1833

Test Method: Flowing Casing PSI: 1220 Tubing PSI: 0 Choke Size: 010/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1295 API Gravity Oil: 53

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: J SAND Status: PRODUCING

Treatment Date: 08/05/2010 Date of First Production this formation: 08/06/2010

Perforations Top: 7739 Bottom: 7770 No. Holes: 80 Hole size: 41

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

Frac'd J-Sand w/ 148680 gals of Silverstim and Slick Water with 283,585#'s of Ottawa sand.

The J-Sand is producing through a Composite Flow Through Plug.

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: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 08/05/2010 Date of First Production this formation: 08/06/2010

Perforations Top: 7084 Bottom: 7322 No. Holes: 112 Hole size:

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

frac'd Codell w/ 133056 gals of Silvestim and Slick Water with 266,216#'s of Ottawa sand. CD perfs 7306-7322, 64 holes @.41". The Codell is producing through a Composite Flow Through Plug. NB perfs 7084-7176, 48 holes @.73". Frac'd NB w/173880 gals of sliverstim and slickwater with 248518# of 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:

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: 10/5/2010 Email: eroberts@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: David S. Neslin **Director of COGCC** Date: 1/10/2011

Attachment Check List

Att Doc Num	Name
400097339	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)