

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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COMPLETED INTERVAL REPORT

Document Number:

2584653

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 05-123-30717-00
6. County: WELD
7. Well Name: BVW
Well Number: 1161-3113
8. Location: QtrQtr: SWNE Section: 31 Township: 11N Range: 61W Meridian: 6
9. Field Name: GROVER Field Code: 33380

Completed Interval

FORMATION: J SAND Status: PRODUCING

Treatment Date: 04/07/2010 Date of First Production this formation: 04/26/2010

Perforations Top: 7574 Bottom: 7597 No. Holes: 80 Hole size: 38/100

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

FRAC'D J-SAND W/179634 GALS SILVERSTIM AND SLICKWATER WITH 372025 LBS OTTAWA SAND.

This formation is commingled with another formation: Yes No

Test Information:

Date: 05/04/2010 Hours: 24 Bbls oil: 47 Mcf Gas: 1 Bbls H2O: 147

Calculated 24 hour rate: Bbls oil: 47 Mcf Gas: 1 Bbls H2O: 147 GOR: 21

Test Method: FLOWING Casing PSI: 73 Tubing PSI: 175 Choke Size:

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1364 API Gravity Oil: 42

Tubing Size: 2 + 7/8 Tubing Setting Depth: 7499 Tbg setting date: 04/09/2010 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: JUSTIN GARRETT

Title: REGULATORY Date: 10/11/2010 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: _____

David S. Neslin

Director of COGCC

Date: 1/12/2011

Attachment Check List

Att Doc Num	Name
2584653	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Waiting on JSAND top	1/11/2011 3:08:31 PM

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