

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:

400101870

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 05-123-16294-00 6. County: WELD
7. Well Name: TURK WHITE D Well Number: 19-8
8. Location: QtrQtr: SENE Section: 19 Township: 3N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: <u>CODELL</u>	Status: <u>TEMPORARILY ABANDONED</u>
Treatment Date: <u>08/13/2010</u>	Date of First Production this formation: <u>05/27/1993</u>
Perforations Top: <u>7007</u> Bottom: <u>7019</u>	No. Holes: <u>88</u> Hole size: <u></u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
<u>Codell is under a sand plug for Niobrara recomple</u>	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:	
Date: <u>09/10/2010</u> Hours: <u>24</u> Bbls oil: <u>12</u> Mcf Gas: <u>27</u> Bbls H2O: <u>4</u>	
Calculated 24 hour rate:	Bbls oil: <u>12</u> Mcf Gas: <u>27</u> Bbls H2O: <u>4</u> GOR: <u>2250</u>
Test Method: <u>Flowing</u> Casing PSI: <u>180</u> Tubing PSI: <u>0</u> Choke Size: <u>20/64</u>	
Gas Disposition: <u>SOLD</u> Gas Type: <u>WET</u> BTU Gas: <u>1297</u> API Gravity Oil: <u>53</u>	
Tubing Size: <u>2 + 3/8</u> Tubing Setting Depth: <u>6984</u> Tbg setting date: <u>09/17/2010</u> Packer Depth: <u></u>	
Reason for Non-Production:	
<u>Sand plug set 6927'-7119' 8/13/10, pressure tested to 4000 psi</u>	
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: NIOBRARA Status: PRODUCING

Treatment Date: 09/02/2010 Date of First Production this formation: 09/04/2010

Perforations Top: 6774 Bottom: 6888 No. Holes: 64 Hole size: 73/100

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

Niobrara recomplete
Frac'd Niobrara w/171310 gals Vistar, Acid, and Slick Water with 250000 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: _____

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: Regulator Specialist Date: 10/19/2010 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: 1/13/2011

Attachment Check List

Att Doc Num	Name
400101870	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)