

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:

400164410

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 05-123-15603-00 6. County: WELD
7. Well Name: DOROUGH Well Number: G7-2
8. Location: QtrQtr: NWNE Section: 7 Township: 4N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIORARA-CODELL Status: PRODUCING

Treatment Date: 12/21/2010 Date of First Production this formation: 01/10/1997
Perforations Top: 6840 Bottom: 7166 No. Holes: 136 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

Codell & Niobrara are commingled
Codell trfrac
Codell 7150'-7166', 116 holes
Frac'd Codell w/132414 gals pHaserFrac, FA Acid, and Slick Water with 245500 lbs Ottawa sand
Niobrara 6840'-6976', 20 holes
Nothing new happened in Niobrara for Codell trfrac

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

Test Information:

Date: 02/05/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 15 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 15 Bbls H2O: 0 GOR: 0
Test Method: Flowing Casing PSI: 420 Tubing PSI: 400 Choke Size: 30/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1235 API Gravity Oil: 0
Tubing Size: 1.66 Tubing Setting Depth: 7110 Tbg setting date: 01/04/2011 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 Specialist

Date: 5/16/2011

Email: JDGarrett@nobleenergyinc.com

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Attachment Check List

Att Doc Num	Name
400164410	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)