


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		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table>	DE	ET	OE	ES				
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COMPLETED INTERVAL REPORT			Document Number: <div style="text-align: center; font-weight: bold;">400147724</div>								
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.											
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<u>Completed Interval</u>											
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Treatment Date: <u>01/27/2011</u> Date of First Production this formation: <u>01/31/2011</u>											
Perforations Top: <u>7565</u> Bottom: <u>7581</u> No. Holes: <u>64</u> Hole size: <u>41</u>											
Provide a brief summary of the formation treatment: Open Hole: <input type="checkbox"/>											
<div style="border: 1px solid black; padding: 2px;">Frac'd J-Sand w/ 145,723 gals of Silverstim and 15% HCl with 280,280#'s of Ottawa Sand.</div>											
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
Test Information:											
Date: <u>02/11/2011</u> Hours: <u>24</u> Bbls oil: <u>37</u> Mcf Gas: <u>385</u> Bbls H2O: <u>52</u>											
Calculated 24 hour rate: Bbls oil: <u>37</u> Mcf Gas: <u>385</u> Bbls H2O: <u>52</u> GOR: <u>10405</u>											
Test Method: <u>Flowing</u> Casing PSI: <u>425</u> Tubing PSI: <u>0</u> Choke Size: <u>18</u>											
Gas Disposition: <u>SOLD</u> Gas Type: <u>WET</u> BTU Gas: <u>1201</u> API Gravity Oil: <u>49</u>											
Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____											
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>											
Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____											
Bridge Plug Depth: _____ Sacks cement on top: _____											

FORMATION: <u>NIOBRARA</u>		Status: <u>PRODUCING</u>		
Treatment Date: <u>01/27/2011</u>		Date of First Production this formation: <u>01/31/2011</u>		
Perforations	Top: <u>6880</u>	Bottom: <u>6990</u>	No. Holes: <u>48</u>	Hole size: <u>73</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>		
<div>Fractured Niobrara w/ 159,046 gals of Silverstim with 239,640#s of Ottawa sand.</div>				
This formation is commingled with another formation:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Test Information:				
Date: <u>02/11/2011</u>	Hours: <u>24</u>	Bbls oil: <u>37</u>	Mcf Gas: <u>385</u>	Bbls H2O: <u>52</u>
Calculated 24 hour rate:	Bbls oil: <u>37</u>	Mcf Gas: <u>385</u>	Bbls H2O: <u>52</u>	GOR: <u>10405</u>
Test Method: <u>FLOWING</u>	Casing PSI: <u>425</u>	Tubing PSI: <u>0</u>	Choke Size: <u>18/64</u>	
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	BTU Gas: <u>1201</u>	API Gravity Oil: <u>49</u>	
Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____	
Reason for Non-Production: <div></div>				
Date formation Abandoned: _____		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____	
Bridge Plug Depth: _____	Sacks cement on top: _____			

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Signed: _____ Print Name: Andrea Rawson

Title: Regulatory Specialist Date: 3/29/2011 Email: arawson@nobleenergyinc.com

Att Doc Num	Name
400147724	FORM 5A SUBMITTED

General Comments

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

Page 2 of 2