

<b>FORM</b> <b>5</b> Rev 02/08	State of Colorado <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		DE ET OE ES
<b>DRILLING COMPLETION REPORT</b>			Document Number:  400117972
This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.			
Completion Type <input checked="" type="checkbox"/> Final completion <input type="checkbox"/> Preliminary completion			
1. OGCC Operator Number: <u>100322</u>		4. Contact Name: <u>Justin Garrett</u>	
2. Name of Operator: <u>NOBLE ENERGY INC</u>		Phone: <u>(303) 228-4449</u>	
3. Address: <u>1625 BROADWAY STE 2200</u>		Fax: <u>(303) 228-4286</u>	
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>	
5. API Number <u>05-123-31249-00</u>		6. County: <u>WELD</u>	
7. Well Name: <u>FURROW USX</u>		Well Number: <u>AB15-99HZ</u>	
8. Location: QtrQtr: <u>SESE</u> Section: <u>15</u> Township: <u>7N</u> Range: <u>64W</u> Meridian: <u>6</u>			
Footage at surface:    Distance: <u>860</u> feet    Direction: <u>FSL</u>		Distance: <u>300</u> feet    Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.568360</u>		As Drilled Longitude: <u>-104.527110</u>	
GPS Data:			
Data of Measurement: <u>07/06/2010</u>		PDOP Reading: <u>2.7</u> GPS Instrument Operator's Name: <u>Paul Tappy</u>	
** If directional footage at Top of Prod. Zone		Dist.: <u>896</u> feet. Direction: <u>FSL</u> Dist.: <u>171</u> feet. Direction: <u>FEL</u>	
Sec: <u>15</u> Twp: <u>7N</u> Rng: <u>64W</u>			
** If directional footage at Bottom Hole		Dist.: <u>660</u> feet. Direction: <u>FNL</u> Dist.: <u>1320</u> feet. Direction: <u>FWL</u>	
Sec: <u>15</u> Twp: <u>7N</u> Rng: <u>64W</u>			
9. Field Name: <u>WATTENBERG</u>		10. Field Number: <u>90750</u>	
11. Federal, Indian or State Lease Number: _____			
12. Spud Date: (when the 1st bit hit the dirt) <u>05/17/2010</u> 13. Date TD: <u>05/30/2010</u> 14. Date Casing Set or D&A: <u>05/30/2010</u>			
15. Well Classification:			
<input type="checkbox"/> Dry <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas/Coalbed <input type="checkbox"/> Disposal <input type="checkbox"/> Stratigraphic <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Storage <input type="checkbox"/> Observation			
16. Total Depth    MD <u>11987</u> TVD** <u>6891</u>		17 Plug Back Total Depth    MD <u>11882</u> TVD** <u>6831</u>	
18. Elevations    GR <u>4828</u> KB <u>4844</u>		One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.	
19. List Electric Logs Run:			
<u>RBT Bond Log, DGR Dual GR/Slimphase 4</u>			
20. Casing, Liner and Cement:			

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	13+3/4	9+5/8	36	0	750	371	0	750	CALC
1ST	8+3/4	7+0/0	26	0	7,368	745	4,770	7,368	CBL
1ST LINER	6+1/8	4+1/2	11.6	0	11,972	480		11,972	CALC

ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PIERRE	6,728		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	6,743		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,755		<input type="checkbox"/>	<input type="checkbox"/>	

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: 2/4/2011 Email: JDGarrett@nobleenergyinc.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400117983	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400130622	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400117972	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400117979	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)