

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

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.

Document Number:

400181260

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>05-123-07492-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>WATKINS CC</u>	Well Number: <u>18-01J</u>
8. Location: QtrQtr: <u>NENE</u> Section: <u>18</u> Township: <u>4N</u> Range: <u>63W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

## Completed Interval

FORMATION: CODELL

Status: PRODUCING

Treatment Date: 05/03/2011

Date of First Production this formation: 05/05/2011

Perforations Top: 6679 Bottom: 6692 No. Holes: 52 Hole size: 41/100

Provide a brief summary of the formation treatment:

Open Hole: ☐Codell recomplete  
Frac'd Codell w/106336 gals Vistar with 244620 lbs Ottawa sandThis formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: 05/13/2011 Hours: 24 Bbls oil: 33 Mcf Gas: 94 Bbls H2O: 12

Calculated 24 hour rate: Bbls oil: 33 Mcf Gas: 94 Bbls H2O: 12 GOR: 2848

Test Method: Flowing Casing PSI: 340 Tubing PSI: 0 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1310 API Gravity Oil: 49

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:

FORMATION: J SAND

Status: ABANDONED COMPLETION

Treatment Date: 05/03/2011

Date of First Production this formation: 10/13/1972

Perforations Top: 6679 Bottom: 6692 No. Holes: 52 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

J Sand is covered by a cemented cast iron bridge plug with 2 sacks of cement

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:

CIBP set 6900' on 4/5/2011

Date formation Abandoned: 04/05/2011 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt

Bridge Plug Depth: 6900 Sacks cement on top: 2

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: 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: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

**Attachment Check List**

Att Doc Num	Name
400181262	CEMENT JOB SUMMARY
400181263	WIRELINE JOB SUMMARY

Total Attach: 2 Files

**General Comments**

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

Total: 0 comment(s)