

FORM  
5

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



DE ET OE ES

Document Number:

400187101

DRILLING COMPLETION REPORT

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  Final completion  Preliminary completion

1. OGCC Operator Number: 100322  
2. Name of Operator: NOBLE ENERGY INC  
3. Address: 1625 BROADWAY STE 2200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Liz Lindow  
Phone: (303) 228-4342  
Fax: (303) 228-4286

5. API Number 05-045-19858-00  
6. County: GARFIELD  
7. Well Name: BATTLEMENT MESA Well Number: 34-43A (35L)  
8. Location: QtrQtr: NWSW Section: 35 Township: 7S Range: 95W Meridian: 6  
Footage at surface: Distance: 2116 feet Direction: FSL Distance: 576 feet Direction: FWL  
As Drilled Latitude: 39.392400 As Drilled Longitude: -107.972026

GPS Data:  
Date of Measurement: 10/19/2010 PDOP Reading: 3.4 GPS Instrument Operator's Name: Jack Kirkpatrick

\*\* If directional footage at Top of Prod. Zone Dist.: 2501 feet. Direction: FSL Dist.: 646 feet. Direction: FEL  
Sec: 34 Twp: 7s Rng: 95w  
\*\* If directional footage at Bottom Hole Dist.: 2460 feet. Direction: FSL Dist.: 664 feet. Direction: FEL  
Sec: 34 Twp: 7s Rng: 95w

9. Field Name: PARACHUTE 10. Field Number: 67350  
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 12/14/2010 13. Date TD: 01/08/2011 14. Date Casing Set or D&A: 01/08/2011

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 10164 TVD\*\* 9974 17 Plug Back Total Depth MD 10060 TVD\*\* 9870

18. Elevations GR 9211 KB 9235  
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:  
CBL, RMT

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	30	20	line pipe	0	184	475	0	184	CALC
SURF	14+3/4	9+5/8	36	0	3,347	1,196	0	3,347	CALC
1ST	8+3/4	4+1/2	11.6	0	10,163	1,095	5,900	10,163	CBL

**ADDITIONAL CEMENT**

Cement work date: 12/19/2010

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
	SURF	360	350	0	350

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	
WILLIAMS FORK	7,173		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	9,737		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	10,026		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Top of gas MD = 8184', hard copies of logs were sent in on 6/20/2011

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Liz Lindow

Title: Regulatory Analyst Date: 7/26/2011 Email: llindow@nobleenergyinc.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400189407	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400188642	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"/>
<b>Other Attachments</b>			
400187101	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400188637	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400188640	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	No CBL or RMTE LAS logs uploaded. NKP	8/22/2011 5:07:06 PM

Total: 1 comment(s)