

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:

400202065

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 05-123-18986-00

6. County: WELD

7. Well Name: KC

Well Number: B 12-10

8. Location: QtrQtr: NWSE Section: 12 Township: 5N Range: 64W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL

Status: PRODUCING

Treatment Date: 06/06/2011

Date of First Production this formation: 10/23/1996

Perforations Top: 6408 Bottom: 6714 No. Holes: 134 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

Codell trfrac  
Codell & Niobrara are commingled  
Codell 6702'-6714' 101 holes  
Frac'd Codell w/123239 gals Vistar and Slick Water with 232000 lbs Ottawa sand  
Niobrara 6408'-6532', 33 holes  
Nothing new happened in Niobrara

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

Test Information:

Date: 07/29/2011 Hours: 24 Bbls oil: 3 Mcf Gas: 43 Bbls H2O: 2

Calculated 24 hour rate: Bbls oil: 3 Mcf Gas: 43 Bbls H2O: 2 GOR: 14333

Test Method: Flowing Casing PSI: 700 Tubing PSI: 400 Choke Size: 30/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1369 API Gravity Oil: 57

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6632 Tbg setting date: 05/12/2011 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: 9/1/2011

Email JDGarrett@nobleenergyinc.com

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### **Attachment Check List**

Att Doc Num	Name
400202065	FORM 5A SUBMITTED

Total Attach: 1 Files

### **General Comments**

**User Group**

**Comment**

**Comment Date**

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Total: 0 comment(s)