

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



DE ET OE ES

Document Number:

400202120

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
2. Name of Operator: NOBLE ENERGY INC
3. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202
4. Contact Name: Justin Garrett
Phone: (303) 228-4449
Fax: (303) 228-4286

5. API Number 05-123-13829-00
6. County: WELD
7. Well Name: PLUMB
Well Number: B5-14
8. Location: QtrQtr: SESW Section: 5 Township: 5N Range: 64W Meridian: 6
9. Field Name: KERSEY Field Code: 44600

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 03/23/2011 Date of First Production this formation: 04/01/1988

Perforations Top: 6544 Bottom: 6853 No. Holes: 369 Hole size:

Provide a brief summary of the formation treatment: Open Hole: ☐

Codell trfrac
Codell & Niobrara are commingled
Codell 6844'-6857', 88 holes
Frac'd Codell w/127188 gals Silverstim and Slick Water with 244000 lbs Ottawa sand
Niobrara 6544'-6744', 281 holes
Nothing new happened in Niobrara during Codell trfrac

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

Test Information:

Date: 05/20/2011 Hours: 24 Bbls oil: 17 Mcf Gas: 87 Bbls H2O: 4

Calculated 24 hour rate: Bbls oil: 17 Mcf Gas: 87 Bbls H2O: 4 GOR: 5118

Test Method: Flowing Casing PSI: 150 Tubing PSI: 0 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1259 API Gravity Oil: 53

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6832 Tbg setting date: 03/26/2011 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

Attachment Check List

Att Doc Num	Name
400202120	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

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