

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:  
400189293

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 4. Contact Name: EILEEN ROBERTS  
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330  
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286  
City: DENVER State: CO Zip: 80202

5. API Number 05-123-32627-00 6. County: WELD  
7. Well Name: CARLSON Well Number: A18-17  
8. Location: QtrQtr: SWNE Section: 18 Township: 6N Range: 64W Meridian: 6  
Footage at surface: Distance: 1369 feet Direction: FNL Distance: 1415 feet Direction: FEL  
As Drilled Latitude: 40.489510 As Drilled Longitude: -104.588800

GPS Data:  
Date of Measurement: 04/20/2011 PDOP Reading: 4.3 GPS Instrument Operator's Name: Paul Tappy

\*\* If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:  
Sec: Twp: Rng:  
\*\* If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:  
Sec: Twp: Rng:

9. Field Name: GREELEY 10. Field Number: 32760  
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 04/01/2011 13. Date TD: 04/05/2011 14. Date Casing Set or D&A: 04/05/2011

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

16. Total Depth MD 7142 TVD\*\* 17 Plug Back Total Depth MD 7087 TVD\*\*

18. Elevations GR 4703 KB 4716  
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:  
GRL/CCL/CBL/VDL, CDL/CNL/GRL, HRIL.

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
SURF	12+1/4	8+5/8	24.00	0	681	294	0	681	VISU
1ST	7+7/8	4+1/2	11.60	0	7,132	575	2,700	7,132	CBL

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:

<b>FORMATION LOG INTERVALS AND TEST ZONES</b>					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
NIOBRARA	6,623		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,930		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,954		<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: Eileen Roberts

Title: Regulatory Specialist Date: 7/26/2011 Email: eroberts@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400189295	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400189293	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	hard copy logs doc#1669737-39, req to be scanned	3/4/2011 2:41:46 PM

Total: 1 comment(s)