

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:

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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.

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: Andrea Rawson  
Phone: (303) 228-4253  
Fax: (303) 228-4286

5. API Number 05-123-25075-00  
6. County: WELD  
7. Well Name: FERGUSON B  
Well Number: 23-19  
8. Location: QtrQtr: NWNW Section: 23 Township: 5N Range: 64W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

## Completed Interval

FORMATION: NIOBRARA-CODELL

Status: PRODUCING

Treatment Date: 07/26/2011

Date of First Production this formation: 08/02/2011

Perforations Top: 6532 Bottom: 6821 No. Holes: 180 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

Codell perfs 6808-6821. Re-Frac Codell w/ 132,537 gals of Slick Water and Vistar 24/25/26, w/ 246,400#'s of Ottawa sand.  
Commingle Codell and Niobrara.

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: 08/05/2011 Hours: 24 Bbls oil: 5 Mcf Gas: 22 Bbls H2O: 1

Calculated 24 hour rate: Bbls oil: 5 Mcf Gas: 22 Bbls H2O: 1 GOR: 4400

Test Method: Flowing Casing PSI: 700 Tubing PSI: 700 Choke Size: 26

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1351 API Gravity Oil: 52

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6785 Tbg setting date: 07/27/2011 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:

FORMATION: NIOBRARA

Status: COMMINGLED

Treatment Date: 07/26/2011

Date of First Production this formation:

Perforations Top: 6532 Bottom: 6644 No. Holes: 128 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐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:

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: Andrea Rawson

Title: Regulatory Specialist Date: Email arawson@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 |
|-------------|------|
|             |      |

Total Attach: 0 Files

**General Comments**

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