

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:

400216201

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: SUSAN MILLER
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4246
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
City: DENVER State: CO Zip: 80202

5. API Number 05-123-31843-00 6. County: WELD
7. Well Name: SCHNEIDER USX Well Number: II31-12PD
8. Location: QtrQtr: SESW Section: 31 Township: 7N Range: 66W Meridian: 6
9. Field Name: EATON Field Code: 19350

Completed Interval

FORMATION: <u>CODELL</u>		Status: <u>COMMINGLED</u>	
Treatment Date: <u>12/13/2010</u>		Date of First Production this formation: <u>01/24/2012</u>	
Perforations	Top: <u>7661</u> Bottom: <u>7673</u>	No. Holes: <u>48</u>	Hole size: <u>0</u>
Provide a brief summary of the formation treatment:		Open Hole: <input checked="" type="checkbox"/>	
<u>Pumped 270,900 lbs Ottawa sand and 134,883 gals 15% HCL, Silverstim and Slick water into Codell formation.</u>			
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Test Information:			
Date: <u>01/25/2011</u>	Hours: <u>6</u>	Bbls oil: <u>61</u>	Mcf Gas: <u>57</u> Bbls H2O: <u>6</u>
Calculated 24 hour rate:		Bbls oil: <u>61</u>	Mcf Gas: <u>57</u> Bbls H2O: <u>6</u> GOR: <u>934</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>1361</u>	Tubing PSI: <u>612</u>	Choke Size: <u>16</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	BTU Gas: <u>1312</u>	API Gravity Oil: <u>45</u>
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>7641</u>	Tbg setting date: <u>12/17/2010</u>	Packer Depth: <u></u>
Reason for Non-Production: <u></u>			
Date formation Abandoned: <u></u> Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt <u></u>			
Bridge Plug Depth: <u></u> Sacks cement on top: <u></u>			

FORMATION: NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: 12/13/2010 Date of First Production this formation: 01/24/2011

Perforations Top: 7349 Bottom: 7673 No. Holes: 96 Hole size: 0

Provide a brief summary of the formation treatment: _____ Open Hole: ☒

Pumped 525,906 lbs of Ottawa sand and 310,873 gals of Silverstim and Slick Water into Niobrara/Codell formations.

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

Test Information:

Date: 01/25/2011 Hours: 6 Bbls oil: 61 Mcf Gas: 57 Bbls H2O: 6

Calculated 24 hour rate: _____ Bbls oil: 61 Mcf Gas: 57 Bbls H2O: 6 GOR: 934

Test Method: Flowing Casing PSI: 1361 Tubing PSI: 612 Choke Size: 16

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1312 API Gravity Oil: 45

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7641 Tbg setting date: 12/17/2010 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: 01/25/2011 Date of First Production this formation: 01/24/2011

Perforations Top: 7349 Bottom: 7491 No. Holes: 48 Hole size: 0

Provide a brief summary of the formation treatment: _____ Open Hole: ☒

Pumped 255,006 lbs Ottawa sand and 175,990 gals of Slick Water and Silverstim into Niobrara formation.

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

Test Information:

Date: 01/25/2011 Hours: 6 Bbls oil: 61 Mcf Gas: 57 Bbls H2O: 6

Calculated 24 hour rate: _____ Bbls oil: 61 Mcf Gas: 57 Bbls H2O: 6 GOR: 934

Test Method: Flowing Casing PSI: 1361 Tubing PSI: 612 Choke Size: 16

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1312 API Gravity Oil: 45

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7641 Tbg setting date: 12/17/2010 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: SUSAN MILLER

Title: Regulatory Analyst Date: _____ Email: smiller@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>

Total: 0 comment(s)