

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:

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### 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: Erin Joseph  
 2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4089  
 3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286  
 City: DENVER State: CO Zip: 80202

5. API Number 05-123-31810-00 6. County: WELD  
 7. Well Name: LAZY D ZN Well Number: 03-15HZ  
 8. Location: QtrQtr: NWNW Section: 3 Township: 11N Range: 66W Meridian: 6  
 Footage at surface: Distance: 560 feet Direction: FNL Distance: 543 feet Direction: FWL  
 As Drilled Latitude: 40.955610 As Drilled Longitude: -104.770190

GPS Data:

Data of Measurement: 08/09/2011 PDOP Reading: 1.9 GPS Instrument Operator's Name: Jeffrey Jones

\*\* If directional footage at Top of Prod. Zone Dist.: 949 feet. Direction: FNL Dist.: 875 feet. Direction: FWL

Sec: 3 Twp: 11N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 740 feet. Direction: FSL Dist.: 874 feet. Direction: FEL

Sec: 3 Twp: 11N Rng: 66W

9. Field Name: WILDCAT 10. Field Number: 99999  
 11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 12/06/2010 13. Date TD: 12/23/2010 14. Date Casing Set or D&A: 12/08/2010

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 14343 TVD\*\* 8903 17 Plug Back Total Depth MD \_\_\_\_\_ TVD\*\* 8903

18. Elevations GR 6048 KB 6074 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:

Compensated Spectral Natural Gamma

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	13+3/4	9+5/8	36	24	2,583	1,431	24	2,583	
1ST	8+3/4	7	26	24	9,363	740	1,000	9,363	
1ST LINER	6+1/8	4+1/2	11.6	8069	14,333				

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

21. Formation log intervals and test zones:

**FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	5,553		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	6,379		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	7,422		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	8,980		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	9,083		<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: Erin Joseph

Title: Regulatory Analyst II Date: \_\_\_\_\_ Email: ejoseph@nobleenergyinc.com

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**General Comments**

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

Total: 0 comment(s)