

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: CODELL

Status: COMMINGLED

Treatment Date: 12/13/2010

Date of First Production this formation: 01/24/2012

Perforations Top: 7661 Bottom: 7673 No. Holes: 48 Hole size: 0

Provide a brief summary of the formation treatment:

Open Hole: ☒

Pumped 270,900 lbs Ottawa sand and 134,883 gals 15% HCL, Silverstim and Slick water into Codell 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: 16/64

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-CODELL Status: PRODUCING

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: 16/64

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: 16/64

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: 10/19/2011 Email: smiller@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name
400216201	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	CHANGED NB-CD TO PROD AND NOTIFIED OPTR, WELLBORE DIAGRAM IS NOT A REQUIREMENT	12/6/2011 7:08:31 AM
Permit	Requesting wellbore diagram and changed of status for NB-CD from commingled to producing.	11/17/2011 3:59:59 PM

Total: 2 comment(s)