

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400246165

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: 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 05-123-34026-00 6. County: WELD
7. Well Name: GREEN USX Well Number: XX07-07D
8. Location: QtrQtr: SENE Section: 7 Township: 1N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: DAKOTA Status: PRODUCING

Treatment Date: 10/06/2011 Date of First Production this formation: 10/13/2011
Perforations Top: 8185 Bottom: 8260 No. Holes: 88 Hole size: 0.4

Provide a brief summary of the formation treatment: Open Hole: [ ]
Frac'd the Dakota w/ 40945 gals of Silverstim and Slick Water with 57,800#'s of Ottawa sand.
The Dakota is producing through a Composite Flow Through Plug.

This formation is commingled with another formation: [ ] Yes [X] No

Test Information:

Date: 10/21/2011 Hours: 24 Bbls oil: 60 Mcf Gas: 100 Bbls H2O: 85
Calculated 24 hour rate: Bbls oil: 60 Mcf Gas: 100 Bbls H2O: 85 GOR: 1666
Test Method: FLOWING Casing PSI: 350 Tubing PSI: 0 Choke Size: 012/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1233 API Gravity Oil: 60
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:

FORMATION: J SAND Status: PRODUCING

Treatment Date: 10/06/2011 Date of First Production this formation: 10/13/2011

Perforations Top: 7983 Bottom: 8019 No. Holes: 88 Hole size: 0.4

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Frac'd the J-Sand w/ 147617 gals of Silverstim and Slick Water with 280,800#'s of Ottawa sand.  
The J-Sand is producing through a Composite Flow Through Plug.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 10/21/2011 Hours: 24 Bbls oil: 60 Mcf Gas: 100 Bbls H2O: 85

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 60 Mcf Gas: 100 Bbls H2O: 85 GOR: 1666

Test Method: FLOWING Casing PSI: 350 Tubing PSI: 0 Choke Size: 012/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1233 API Gravity Oil: 60

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: \_\_\_\_\_

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 10/06/2011 Date of First Production this formation: 10/13/2011

Perforations Top: 7316 Bottom: 7552 No. Holes: 88 Hole size: 0

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Frac'd the Niobrara-Codell w/ 275462 gals of Silverstim and Slick Water with 499,900#'s of Ottawa sand.  
The Codell is producing through a Composite Flow Through Plug.  
Commingle the Niobrara and Codell.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 10/06/2011 Hours: 24 Bbls oil: 60 Mcf Gas: 100 Bbls H2O: 85

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 60 Mcf Gas: 100 Bbls H2O: 85 GOR: 1666

Test Method: FLOWING Casing PSI: 350 Tubing PSI: 0 Choke Size: 012/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1233 API Gravity Oil: 60

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: Eileen Roberts

Title: Regulatory Specialist

Date: \_\_\_\_\_

Email eroberts@nobleenergyinc.com

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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**

**User Group**

**Comment**

**Comment Date**

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

Total: 0 comment(s)