

**FORM
5**Rev
02/08**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400279801

Date Received:

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: Andrea Rawson

2. Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4253

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-123-25438-00

6. County: WELD

7. Well Name: Shelton H

Well Number: 12-29

8. Location: QtrQtr: SWSW Section: 1 Township: 3N Range: 65W Meridian: 6

Footage at surface: Distance: 180 feet Direction: FSL Distance: 1220 feet Direction: FWL

As Drilled Latitude: 40.247580 As Drilled Longitude: -104.616260

GPS Data:

Data of Measurement: 03/10/2008 PDOP Reading: 1.7 GPS Instrument Operator's Name: Paul Tappy

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

9. Field Name: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 02/05/2008 13. Date TD: 02/09/2008 14. Date Casing Set or D&A: 02/09/2008

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7715 TVD** 17 Plug Back Total Depth MD 7667 TVD**

18. Elevations GR 4841 KB 4855

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:

CBL/GR/CCL, DIL/GR, CDL/CNL/ML

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	12+1/4	8+5/8	24	0	674	354	0	674	
1ST	7+7/8	4+1/2	11.6	0	7,690	880	1,580	7,690	

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	3,856		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,457		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,956		<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES	6,075		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,795		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,078		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,102		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,188		<input type="checkbox"/>	<input type="checkbox"/>	
D SAND	7,505		<input type="checkbox"/>	<input type="checkbox"/>	
MOWRY	7,547		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,560		<input type="checkbox"/>	<input type="checkbox"/>	
J-3 SAND	7,630		<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: Andrea Rawson

Title: Regulatory specialist Date: _____ Email: arawson@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400280202	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<u>Other Attachments</u>		
400280185	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400280186	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

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

Total: 0 comment(s)