

FORM  
5A

Rev  
06/12

State of Colorado  
Oil and Gas Conservation Commission

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



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**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  
2. Name of Operator: NOBLE ENERGY INC  
3. Address: 1625 BROADWAY STE 2200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Eileen Roberts  
Phone: (303) 2284330  
Fax: (303) 2284286

5. API Number 05-123-33990-00  
6. County: WELD  
7. Well Name: SHAKLEE USX  
Well Number: X25-18D  
8. Location: QtrQtr: SEnw Section: 25 Township: 2N Range: 65W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

### Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: \_\_\_\_\_  
Treatment Date: 12/12/2011 End Date: \_\_\_\_\_ Date of First Production this formation: 01/19/2012  
Perforations Top: 7033 Bottom: 7282 No. Holes: 96 Hole size: 0  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Frac'd the Niobrara-Codell w/ 297200 gals of Silverstim and Slick Water with 375,607#'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

Total fluid used in treatment (bbl): \_\_\_\_\_ Max pressure during treatment (psi): \_\_\_\_\_

Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): \_\_\_\_\_

Type of gas used in treatment: \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_

Total acid used in treatment (bbl): \_\_\_\_\_ Max frac gradient (psi/ft): \_\_\_\_\_

Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): \_\_\_\_\_

Fresh water used in treatment (bbl): \_\_\_\_\_ Disposition method for flowback: \_\_\_\_\_

Total proppant used (lbs): \_\_\_\_\_ Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

#### Test Information:

Date: 01/27/2012 Hours: 8 Bbl oil: 20 Mcf Gas: 38 Bbl H2O: 2

Calculated 24 hour rate: Bbl oil: 20 Mcf Gas: 38 Bbl H2O: 2 GOR: 1900

Test Method: FLOWING Casing PSI: 421 Tubing PSI: 0 Choke Size: 012/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1280 API Gravity Oil: 47

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: 4/2/2012 Email: eroberts@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Name
400267388	FORM 5A SUBMITTED

Total Attach: 1 Files

#### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)