

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

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DE ET OE ES

Document Number:

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Date Received:

04/05/2007

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: JOE MAZZOTTI

2. Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4223

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-125-10259-00

6. County: YUMA

7. Well Name: RENZELMAN

Well Number: 14-23

8. Location: QtrQtr: SWSW Section: 23 Township: 2S Range: 43W Meridian: 6

Footage at surface: Distance: 691 feet Direction: FSL Distance: 680 feet Direction: FWL

As Drilled Latitude: 39.864140 As Drilled Longitude: -102.163350

GPS Data:

Date of Measurement: 03/20/2007 PDOP Reading: 3.1 GPS Instrument Operator's Name: SCOTT DEMANCHE

** 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: BEECHER ISLAND

10. Field Number: 5997

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 09/10/2006 13. Date TD: 09/11/2006 14. Date Casing Set or D&A: 09/11/2006

15. Well Classification:

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

16. Total Depth MD 1635 TVD** 17 Plug Back Total Depth MD 1696 TVD**

18. Elevations GR 3603 KB 3609

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:

PE-TRIPLE COMBO; PE-CN/LD; PE-AI/LC; CBL/GR/CCL

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	9+7/8	7		0	189	70	0	195	CALC
1ST	6+1/4	4+1/2		0	1,629	75	1,050	1,635	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____					
Method used	String	Cementing tool setting/perf 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	
NIOBRARA	1,454		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: Y Print Name: JOE MAZOTTI

Title: REG ANALYST Date: 4/2/2007 Email: JMAZOTTI@NOBLEENERGYINC.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
	CMT Summary *	Yes <input type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

General Comments

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

Total: 0 comment(s)