

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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Document Number:

400268084

Date Received:

05/03/2012

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: Liz Lindow
Phone: (303) 228-4342
Fax: (303) 228-4286

5. API Number 05-123-33997-00
6. County: WELD
7. Well Name: SHAKLEE USX
Well Number: X25-20D
8. Location: QtrQtr: SENW Section: 25 Township: 2N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: PRODUCING Treatment Type:
Treatment Date: 12/09/2011 End Date: Date of First Production this formation: 01/19/2012
Perforations Top: 7071 Bottom: 7791 No. Holes: 156 Hole size: 0

Provide a brief summary of the formation treatment:

Open Hole: ☐

419696 gals silverstim; 598780 lbs Ottawa sand proppant; 13200 lbs SB Excel

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:

Max frac gradient (psi/ft):

Total acid used in treatment (bbl):

Number of staged intervals:

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: 2 Mcf Gas: 6 Bbl H2O: 1
Calculated 24 hour rate: Bbl oil: 2 Mcf Gas: 6 Bbl H2O: 1 GOR: 3000
Test Method: Flowing Casing PSI: 220 Tubing PSI: 0 Choke Size: 12/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1286 API Gravity Oil: 46
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: ** Wireline and Cement Job Summary must be attached.

Comment:

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

Signed: _____ Print Name: Liz Lindow

Title: Regulatory Analyst Date: 5/3/2012 Email llindow@nobleenergyinc.com
:

Attachment Check List

Att Doc Num	Name
400268084	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Off Hold. Received additional form 5A with missing information.	3/7/2012 9:05:10 AM
Permit	On Hold. Missing seperated formation tabs.	7/26/2012 10:39:06 AM

Total: 2 comment(s)