

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



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Document Number:
400323274

Date Received:
09/18/2012

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: JEAN MUSE-REYNOLDS
 2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4316
 3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
 City: DENVER State: CO Zip: 80202

5. API Number 05-123-34680-00 6. County: WELD
 7. Well Name: HOFFMAN C Well Number: 02-33D
 8. Location: QtrQtr: NESW Section: 2 Township: 4N Range: 64W Meridian: 6
 Footage at surface: Distance: 2391 feet Direction: FSL Distance: 2385 feet Direction: FWL
 As Drilled Latitude: 40.340750 As Drilled Longitude: -104.518500

GPS Data:
 Date of Measurement: 03/22/2012 PDOP Reading: 2.6 GPS Instrument Operator's Name: PAUL TAPPY

** If directional footage at Top of Prod. Zone Dist.: 1286 feet. Direction: FSL Dist.: 125 feet. Direction: FEL
 Sec: 3 Twp: 4N Rng: 64W
 ** If directional footage at Bottom Hole Dist.: 1282 feet. Direction: FSL Dist.: 138 feet. Direction: FEL
 Sec: 3 Twp: 4N Rng: 64W

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) 04/11/2012 13. Date TD: 04/16/2012 14. Date Casing Set or D&A: 04/17/2012

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 7718 TVD** 6906 17 Plug Back Total Depth MD 7663 TVD** 6850

18. Elevations GR 4620 KB 4633 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:
 DIL/GR/SP/Caliper
 Caliper/Comp. Density/Neutron/GP/SP/ML
 CBL/CCL/GR

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	13	711	229	13	229	CALC
1ST	7+7/8	4+1/2	11.6	980	7,709	680	1,130	7,709	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	
SHANNON			<input type="checkbox"/>	<input type="checkbox"/>	
PIERRE	2,669		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,887		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,680		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,252		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,538		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

LOGS COMING WITH THE FORM 10 UNDER SEPARATE COVER.

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

Signed: _____ Print Name: JEAN MUSE-REYNOLDS

Title: Regulatory Compliance Date: 9/18/2012 Email: jmuse@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2233177	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400326760	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input 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"/>
Other Attachments			
400323274	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400326757	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400326762	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400326763	TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Off hold. Attached cement job summary per operator.	12/13/2012 3:05:16 PM
Permit	On Hold. Requested cement job summary. Form ok to pass when received.	12/13/2012 12:22:28 PM
Permit	On Hold. Requested cement job summary. Form ok to pass when received.	10/24/2012 2:41:55 PM

Total: 3 comment(s)