

FORM
5Rev
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:

400351763

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: 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 05-123-31200-00

6. County: WELD

7. Well Name: ARD PC C

Well Number: 06-21D

8. Location: QtrQtr: SENW Section: 6 Township: 4N Range: 64W Meridian: 6

Footage at surface: Distance: 2063 feet Direction: FNL Distance: 1964 feet Direction: FWL

As Drilled Latitude: 40.342730 As Drilled Longitude: -104.595000

GPS Data:

Data of Measurement: 03/14/2012 PDOP Reading: 2.7 GPS Instrument Operator's Name: PAUL TAPPY

** If directional footage at Top of Prod. Zone Dist.: 2588 feet. Direction: FNL Dist.: 2481 feet. Direction: FEL

Sec: 6 Twp: 4N Rng: 64W

** If directional footage at Bottom Hole Dist.: 2597 feet. Direction: FNL Dist.: 2445 feet. Direction: FEL

Sec: 6 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) 02/17/2012 13. Date TD: 02/21/2012 14. Date Casing Set or D&A: 02/24/2012

15. Well Classification:

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

16. Total Depth MD 7835 TVD** 7736 17 Plug Back Total Depth MD 7779 TVD** 7680

18. Elevations GR 4814 KB 4828

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
NO OPEN HOLE LOGS

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	14	633	250	14	633	
1ST	7+7/8	4+1/2	11.6	1220	7,825	720	1,220	7,825	

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	
PIERRE	2,825		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,821		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,495		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,032		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,917		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,155		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,624		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

NO OPEN HOLE LOGS WERE RUN

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: _____

Email: jmuse@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400354537	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400353811	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"/>
<u>Other Attachments</u>					
400353813	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400353815	LAS-DIRECTIONAL SURVEY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400353818	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)