

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:

400375931

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: Julie Webb

2. Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2316

3. Address: 1625 BROADWAY STE 2200

Fax:

City: DENVER State: CO Zip: 80202

5. API Number 05-123-15159-00

6. County: WELD

7. Well Name: FRANK

Well Number: H21-12

8. Location: QtrQtr: NWSW Section: 21 Township: 3N Range: 65W Meridian: 6

Footage at surface: Distance: 1980 feet Direction: FSL Distance: 660 feet Direction: FWL

As Drilled Latitude: As Drilled Longitude:

## GPS Data:

Date of Measurement: PDOP Reading: GPS Instrument Operator's Name:

\*\* 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: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 09/04/1991 13. Date TD: 09/09/1991 14. Date Casing Set or D&amp;A: 09/09/1991

## 15. Well Classification:

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

16. Total Depth MD 7346 TVD\*\* 17 Plug Back Total Depth MD 7303 TVD\*\*

18. Elevations GR 4849 KB 4859

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:

Gamma Ray CCL/CBL

## 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	0	497	240	0	497	CALC
1ST	7+7/8	2+7/8	6.5	0	7,346	850	3,840	7,346	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 12/19/2012

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	S.C. 1.1		250	10	666

Details of work:

Control well w/kill fluid. NU and RIH w/ 2 3/8" blade bit, 2 7/8" CSG scraper, 195 jts 1 1/4" N-80 tubing. Tagged fill at 7295 KB. No Clean out necessary. Circulated hole clean. TIH w/RBP, retrieved head, 216 jts tubing. Set RBP @ 6740 KB w/ 214 jts. PSI test csg to 1000#, good test. Unland casing head. NU and RIH w/ 1 1/4" mule shoe and 21 jts 1" 1.8# N-80 tbg. Pick Up mule shoe and TIH w/21 jts of 1" to 661'. Established circulation and roll hole. Test iron to 3000 psi. Pump 3 bbls spacer ahead. Pump 250 sks of "G" neat 15.8 ppg cement from 664' to surface. Had circulation during entire job. Relanded casing at 40000# pack off well head. Bond log from 1000' to surface. Annular fill bottom cement was at 664' w/good cement to surface. Eelease the RBP. Test tubing to 6500psi. Land 1 1/4" 2.75# J-55 tubing to 7178.64. Rig down and move off.

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	
			<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: \_\_\_\_\_

Print Name: Julie Webb

Title: Regulatory Analyst

Date: \_\_\_\_\_

Email: juliewebb@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****User Group****Comment****Comment Date**

--	--	--

Total: 0 comment(s)