

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



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Document Number:

400384595

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 05-123-14869-00

6. County: WELD

7. Well Name: MOSER FARMS

Well Number: 4-2

8. Location: QtrQtr: NESE Section: 4 Township: 2N Range: 65W Meridian: 6

Footage at surface: Distance: 2100 feet Direction: FSL Distance: 500 feet Direction: FEL

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) 01/16/1991 13. Date TD: 01/20/1991 14. Date Casing Set or D&A: 01/21/1991

15. Well Classification:

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

16. Total Depth MD 7276 TVD** 17 Plug Back Total Depth MD 7239 TVD**

18. Elevations GR 4849 KB 4860

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	496	164	0	496	CALC
1ST	7+7/8	4+1/2	12.6	0	7,269	160	6,316	7,276	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 12/13/2012

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	S.C. 1.1		300	11	830
	S.C. 1.1		220	3,800	4,650

Details of work:

Control well w/ 20 bbls kill fluid. RIH w/ 2 5/8" bit and 4 1/2" scraper 200 jts. Tag fill at 7178'. RIH w/WLTC-RBP. RBP set @ 6730' KB w/ 215 jts. Roll hole clean. PSI test csg to 1500#, good test. Dump 2 sks of sand on plug. Unland casing. RIH w/ 1 1/4" mule shoe 148 jts 3.02# N-80 CSH.

Pick Up mule shoe and TIH w/148 jts of 1 1/4" to 4633'. Pump 220 sks of 13.5# fraccem cement from 3800' to 4650'. Run back in with mule shoe and 27 jts of 1 1/4" to 845. Pump 300 sks of "G" neat 15.8 ppg cement from 830 to surface. Relanded casing with 90K pulled. Run logs from 5000' to surface, cement was sporadic from 4600' to 3800' and good bond from 840' to surface. TIH w/ Ret head, release plug. Land 2 3/8" 4.7# J-55 tubing to 7148.72'.

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:

Gamma Ray CCL/CBL hard copy will be mailed

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>					
400384612	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input 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

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Total: 0 comment(s)