FORM 5	State of Colorado	DE	ET	OE	ES

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

DRILLING COMPLETION REPORT

DE	ET	OE	ES

Document Number: 400398174

Date Received: 04/01/2013

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 [X] Final completion [ ] Preliminary 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: Julie Webb
   Phone: (720) 587-2316
   Fax:

5. API Number: 05-123-18677-00
6. County: WELD
7. Well Name: BICKLING   Well Number: E 21-10
8. Location: QtrQtr: NWSE   Section: 21   Township: 6N   Range: 65W   Meridian: 6
   Footage at surface: Distance: 1922 feet Direction: FSL   Distance: 1986 feet Direction: FEL
   As Drilled Latitude: As Drilled Longitude:

GPS Data:
   Data 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: 59296

12. Spud Date: (when the 1st bit hit the dirt) 11/28/1994 13. Date TD: 12/02/1994 14. Date Casing Set or D&A: 12/02/1994

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

16. Total Depth   MD 7279   TVD**
17 Plug Back Total Depth   MD 7264   TVD**

18. Elevations   GR 4725   KB 4712

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	352	350	0	352	CALC
1ST	7+7/8	2+7/7	6.5	0	7,297	630	6,264	7,279	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date:	11/16/2012				
Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	S.C. 1.1	505	210	40	520

Details of work:

Control well w/ kill fluid. RIH w/ blade bit, and scraper, 227 jts. Tagged fill at 7122' KB. TIH w/ RBP, retrieved head, 220 jts 1 ¼" tubing. Set RBP @ 6945' KB w/ 220 jts. Unland casing.
Pick Up mule shoe and TIH w/16 jts of 1 ¼"to 505'. Roll hole clean. Test lines to 2500#. Pump 210 sks of "G" neat 15.8 ppg cement from 520' to 13'. Reland casing. Bond log from 1000' to surface. RIH w/ retrieving head and establish circulation and latch onto RBP. Roll hole clean and release RBP. Land tubing to 7071.1'. 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	
			☐	☐	

Comment:

Gamma Ray CCL/CBL hard copy 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: 4/1/2013   Email: juliewebb@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			

Attachment Checklist

Att Doc Num	Document Name				
400398178	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
	Directional Survey **	Yes	☐	No	☒
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☒	No	☐
	Other	Yes	☐	No	☒

Other Attachments

Att Doc Num	Document Name				
400398174	FORM 5 SUBMITTED	Yes	☒	No	☐
400398179	LAS-CEMENT BOND	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)