

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:

400409880

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: <u>100322</u>	4. Contact Name: <u>Kathleen Mills</u>
2. Name of Operator: <u>NOBLE ENERGY INC</u>	Phone: <u>(720) 587-2226</u>
3. Address: <u>1625 BROADWAY STE 2200</u>	Fax: <u>(303) 228-4286</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-123-35629-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>WELLS RANCH</u>	Well Number: <u>AA12-63-1HN</u>
8. Location: QtrQtr: <u>SESE</u> Section: <u>12</u> Township: <u>6N</u> Range: <u>63W</u> Meridian: <u>6</u>	
Footage at surface: Distance: <u>1077</u> feet Direction: <u>FSL</u> Distance: <u>215</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.496790</u> As Drilled Longitude: <u>-104.376000</u>	

### GPS Data:

Date of Measurement: 08/09/2012 PDOP Reading: 2.9 GPS Instrument Operator's Name: PAUL TAPPY

\*\* If directional footage at Top of Prod. Zone Dist.: 979 feet. Direction: FSL Dist.: 934 feet. Direction: FEL

Sec: 12 Twp: 6N Rng: 63W

\*\* If directional footage at Bottom Hole Dist.: 927 feet. Direction: FSL Dist.: 496 feet. Direction: FWL

Sec: 12 Twp: 6N Rng: 63W

9. Field Name: <u>WATTENBERG</u>	10. Field Number: <u>90750</u>
11. Federal, Indian or State Lease Number: _____	

12. Spud Date: (when the 1st bit hit the dirt) <u>08/28/2012</u>	13. Date TD: <u>09/02/2012</u>	14. Date Casing Set or D&A: <u>09/03/2012</u>
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### 15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD <u>11016</u> TVD** <u>6659</u>	17 Plug Back Total Depth MD <u>11005</u> TVD** <u>6648</u>
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18. Elevations GR <u>4857</u> KB <u>4881</u>
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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 OTHER LOGS SENT AT THIS TIME

### 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
CONDUCTOR	16	16	42.09	0	124	80	0	124	
SURF	13+3/4	9+5/8	36	0	720	421	0	720	
1ST	8+3/4	7	26	0	7,090	640	1,752	7,090	
1ST LINER	6+1/8	4+1/2	11.6	6947	11,006	0			

### 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	
PARKMAN	3,620		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,438		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,965		<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES	5,943		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	6,319		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,633		<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: Kathleen Mills

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: kmills@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400409891	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400409890	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"/>
<b>Other Attachments</b>			
400409889	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400409892	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

**User Group**

**Comment**

**Comment Date**

User Group	Comment	Comment Date

Total: 0 comment(s)