

**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



| | | | |
|----------------------------------|----|----|----|
| DE | ET | OE | ES |
| Document Number: 1714593 | | | |
| Date Received: 04/21/2009 | | | |

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: KATE SHIRLEY |
| 2. Name of Operator: NOBLE ENERGY INC | Phone: (281) 876-6105 |
| 3. Address: 1625 BROADWAY STE 2200 | Fax: (281) 876-2503 |
| City: DENVER State: CO Zip: 80202 | |

| | |
|--|------------------------------------|
| 5. API Number 05-045-15879-00 | 6. County: GARFIELD |
| 7. Well Name: NAUROTH | Well Number: 2-43B |
| 8. Location: QtrQtr: NESE Section: 2 Township: 8S Range: 96W Meridian: 6 | |
| Footage at surface: Distance: 2496 feet Direction: FSL | Distance: 1009 feet Direction: FEL |
| As Drilled Latitude: 39.378814 | As Drilled Longitude: -108.070859 |

GPS Data:

Data of Measurement: 10/01/2008 PDOP Reading: 2.3 GPS Instrument Operator's Name: DAVE SPURLOCK

** If directional footage at Top of Prod. Zone Dist.: 2166 feet. Direction: FSL Dist.: 769 feet. Direction: FEL

Sec: 2 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 2105 feet. Direction: FSL Dist.: 793 feet. Direction: FEL

Sec: 2 Twp: 8S Rng: 96W

| | |
|--|-------------------------|
| 9. Field Name: GRAND VALLEY | 10. Field Number: 31290 |
| 11. Federal, Indian or State Lease Number: | |

12. Spud Date: (when the 1st bit hit the dirt) 10/11/2008 13. Date TD: 10/17/2008 14. Date Casing Set or D&A: 10/18/2008

15. Well Classification:

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

16. Total Depth MD 5635 TVD** 5610 17 Plug Back Total Depth MD 5582 TVD** 5557

18. Elevations GR 5738 KB 5759 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, RMT

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 | 20 | 16 | | 0 | 100 | | 0 | 100 | CALC |
| SURF | 12+1/4 | 8+5/8 | | 0 | 1,530 | 440 | 0 | 1,530 | CALC |
| 1ST | 7+7/8 | 4+1/2 | | 0 | 5,625 | 560 | 2,072 | 5,625 | CBL |

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 | |
| WILLIAMS FORK | 2,742 | | <input type="checkbox"/> | <input type="checkbox"/> | TOG:MEASURED DEPTH:TOP: 4032' |
| CAMEO | 5,037 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| ROLLINS | 5,470 | | <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: Y _____

Print Name: KATE SHIRLEY _____

Title: REGULATORY _____

Date: 4/20/2009 _____

Email: KSHIRLEY@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"/> |
| 1787252 | 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 type="checkbox"/> | No | <input checked="" type="checkbox"/> |
| | Other | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |

General Comments

| User Group | Comment | Comment Date |
|------------|--|--------------------------|
| Permit | ON HOLD. REQUESTED CEMENT TICKETS FOR SURFACE PIPE. PAPER AND DIGITAL LOGS RECEIVED. | 10/7/2010 11:03:07 AM |

Total: 1 comment(s)