

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:

400511274

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: Kathleen Mills

2. Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2226

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-123-33302-00

6. County: WELD

7. Well Name: KUMMER PC LE

Well Number: 23-17

8. Location: QtrQtr: SENE Section: 23 Township: 8N Range: 61W Meridian: 6

Footage at surface: Distance: 2100 feet Direction: FNL Distance: 1250 feet Direction: FEL

As Drilled Latitude: 40.648990 As Drilled Longitude: -104.167740

GPS Data:

Date of Measurement: 06/07/2011 PDOP Reading: 2.3 GPS Instrument Operator's Name: PAUL TAPPY

** 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) 05/27/2011 13. Date TD: 05/30/2011 14. Date Casing Set or D&A: 05/31/2011

15. Well Classification:

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

16. Total Depth MD 7345 TVD** 17 Plug Back Total Depth MD 7290 TVD**

18. Elevations GR 4992 KB 5005

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, TRIPLE COMBO

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	728	301	0	728	VISU
1ST	7+7/8	4+1/2	11.6	0	7,335	670	1,933	7,335	CALC

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	
PIERRE	2,285		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,475		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,362		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,861		<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES	5,647		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,376		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,713		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,092		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,166		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

PILOT WELL IS SI PENDING REVIEW OF SURROUNDING WELLS - PROD CMT AND BH PLUG INFO ATTACHED. 5/31/2011 CMT PLUG 7251-7335' AUTO CREATED FROM CASING CMT.

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 ?			
<u>Attachment Checklist</u>					
400511306	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 checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400511297	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400511301	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400511303	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)