

FORM
5A

Rev
06/12

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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Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of 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: Kathleen Mills
Phone: (720) 587-2226
Fax: (303) 228-4286

5. API Number 05-123-24132-00
6. County: WELD
7. Well Name: Sater USX CC
Well Number: 19-17
8. Location: QtrQtr: SWNE Section: 19 Township: 4N Range: 63W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J SAND Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/20/2011 End Date: 10/20/2011 Date of First Production this formation: 11/17/2011

Perforations Top: 7174 Bottom: 7218 No. Holes: 160 Hole size: 0.41

Provide a brief summary of the formation treatment: Open Hole: ☐

FRAC'D W/155431 GAL SLICK WATER AND 112884# OTTAWA SAND

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 3701 Max pressure during treatment (psi): 3148

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: Min frac gradient (psi/ft): 0.58

Total acid used in treatment (bbl): Number of staged intervals: 7

Recycled water used in treatment (bbl): 121 Flowback volume recovered (bbl): 250

Fresh water used in treatment (bbl): 3480 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 112884 Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/05/2011 Hours: 24 Bbl oil: 3 Mcf Gas: 174 Bbl H2O: 92

Calculated 24 hour rate: Bbl oil: 3 Mcf Gas: 174 Bbl H2O: 92 GOR: 58000

Test Method: FLOWING Casing PSI: 550 Tubing PSI: 550 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1335 API Gravity Oil: 50

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7141 Tbg setting date: 10/24/2011 Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

** Bridge Plug Depth: ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

Comment:

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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

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>
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<u>Comment Date</u>

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Total: 0 comment(s)