

FORM 5A
Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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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 4. Contact Name: Eileen Roberts
 2. Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330
 3. Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286
 City: DENVER State: CO Zip: 80202 Email: eroberts@nobleenergyinc.com

5. API Number 05-123-37543-00 6. County: WELD
 7. Well Name: ROHN STATE Well Number: LD09-63HN
 8. Location: QtrQtr: SESE Section: 9 Township: 9N Range: 58W Meridian: 6
 9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/02/2013 End Date: 12/02/2013 Date of First Production this formation: 12/18/2013
 Perforations Top: 6165 Bottom: 9525 No. Holes: 0 Hole size: _____

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

Frac'd the Niobrara w/ 2059403 gals of Silverstim and Slick Water with 2770043#'s of Ottawa sand.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): <u>65623</u>	Max pressure during treatment (psi): <u>3615</u>
Total gas used in treatment (mcf): <u>0</u>	Fluid density at initial fracture (lbs/gal): <u>8.43</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.86</u>
Total acid used in treatment (bbl): <u>0</u>	Number of staged intervals: <u>18</u>
Recycled water used in treatment (bbl): <u>3018</u>	Flowback volume recovered (bbl): <u>340</u>
Fresh water used in treatment (bbl): <u>46015</u>	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>2770043</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/24/2013 Hours: 24 Bbl oil: 324 Mcf Gas: 165 Bbl H2O: 513
 Calculated 24 hour rate: Bbl oil: 324 Mcf Gas: 165 Bbl H2O: 513 GOR: 509
 Test Method: FLOWING Casing PSI: 794 Tubing PSI: 260 Choke Size: 20/64
 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1381 API Gravity Oil: 38
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 5971 Tbg setting date: 12/13/2013 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: Eileen Roberts

Title: Regulatory Specialist Date: _____ Email: eroberts@nobleenergyinc.com
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Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)