

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400606200

Date Received: 05/12/2014

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
Email: kmills@nobleenergyinc.com

5. API Number 05-123-23081-00
6. County: WELD
7. Well Name: ONYX
Well Number: 13-29
8. Location: QtrQtr: NWSW Section: 29 Township: 6N Range: 67W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 06/09/2011 End Date: 06/09/2011 Date of First Production this formation: 07/25/2011
Perforations Top: 6866 Bottom: 7002 No. Holes: 64 Hole size: 0.73

Provide a brief summary of the formation treatment: Open Hole: []
FRAC'D W/163203 GALS VISTAR, 1000 GAL 15% HCL AND 251541 OTTAWA SAND

This formation is commingled with another formation: [X] Yes [] No
Total fluid used in treatment (bbl): 3885 Max pressure during treatment (psi): 4366
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): 0.94
Total acid used in treatment (bbl): 24 Number of staged intervals: 9
Recycled water used in treatment (bbl): 271 Flowback volume recovered (bbl): 998
Fresh water used in treatment (bbl): 3614 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 251541 Rule 805 green completion techniques were utilized: [X]
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 07/29/2011 Hours: 24 Bbl oil: 6 Mcf Gas: 16 Bbl H2O: 15
Calculated 24 hour rate: Bbl oil: 6 Mcf Gas: 16 Bbl H2O: 15 GOR: 27
Test Method: FLOWIG Casing PSI: 1136 Tubing PSI: 402 Choke Size: 32/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1278 API Gravity Oil: 38
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7164 Tbg setting date: 06/15/2011 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:

THIS IS A CORRECTION TO DOC#400202115. THE NB WAS NOT REPORTED AS A CM FORMATION

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: 5/12/2014 Email: kmills@nobleenergyinc.com
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Attachment Check List

Att Doc Num **Name**

400606200	FORM 5A SUBMITTED
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Total Attach: 1 Files

General Comments

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

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