

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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Document Number: 400701575

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 05-123-38645-00 6. County: WELD
 7. Well Name: Wells Ranch Well Number: AE30-65-1BHNB
 8. Location: QtrQtr: NWSW Section: 29 Township: 6N Range: 62W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/06/2014 End Date: 07/23/2014 Date of First Production this formation: 08/30/2014

Perforations Top: 7007 Bottom: 11828 No. Holes: 0 Hole size: _____

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

Frac'd the Niobrara w/ 1165821 gals of PremStim and Slick Water with 4797184#'s of Ottawa sand.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 27757 Max pressure during treatment (psi): 6990
 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.43
 Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.95
 Total acid used in treatment (bbl): 0 Number of staged intervals: 25
 Recycled water used in treatment (bbl): 187536 Flowback volume recovered (bbl): 543
 Fresh water used in treatment (bbl): 90039 Disposition method for flowback: RECYCLE
 Total proppant used (lbs): 4797184 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 09/10/2014 Hours: 24 Bbl oil: 628 Mcf Gas: 631 Bbl H2O: 365
 Calculated 24 hour rate: Bbl oil: 628 Mcf Gas: 631 Bbl H2O: 365 GOR: 1004
 Test Method: FLOWING Casing PSI: 914 Tubing PSI: 598 Choke Size: 20/64
 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1345 API Gravity Oil: 60
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 6732 Tbg setting date: 08/18/2014 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

<u>Att Doc Num</u>	<u>Name</u>
400701575	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

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