

FORM  
5Rev  
09/14

## 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:

400702668

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

OGCC Operator Number: 100322

Contact Name: Kathleen Mills

Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2226

Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

API Number 05-123-38777-00

County: WELD

Well Name: RICO

Well Number: LC29-74-1HNA

Location: QtrQtr: SWSE Section: 29 Township: 9N Range: 59W Meridian: 6

Footage at surface: Distance: 340 feet Direction: FSL Distance: 2092 feet Direction: FEL

As Drilled Latitude: 40.714952 As Drilled Longitude: -103.999938

## GPS Data:

Date of Measurement: 09/25/2014 PDOP Reading: 2.7 GPS Instrument Operator's Name: TOA SAGAPOLUTELE

\*\* If directional footage at Top of Prod. Zone Dist.: 941 feet. Direction: FSL Dist.: 1659 feet. Direction: FEL

Sec: 29 Twp: 9N Rng: 59W

\*\* If directional footage at Bottom Hole Dist.: 675 feet. Direction: FNL Dist.: 1557 feet. Direction: FEL

Sec: 20 Twp: 9N Rng: 59W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/07/2014 Date TD: 05/19/2014 Date Casing Set or D&amp;A: 05/21/2014

Rig Release Date: 06/18/2014 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 15480 TVD\*\* 6048 Plug Back Total Depth MD 15469 TVD\*\* 6048

Elevations GR 4871 KB 4895 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

USIT, MUD, GR

## CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	42.09	0	124	80	0	124	VISU
SURF	13+3/4	9+5/8	36	0	633	371	0	633	VISU
1ST	8+3/4	7	26	0	6,408	515	575	6,408	CALC
4TH	6+1/8	4+1/2	11.6	6263	15,470	0			

## 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:

## FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PIERRE	2,549				
PARKMAN	3,421				
SUSSEX	4,102				
SHANNON	4,532				
TEEPEE BUTTES	5,742				
NIOBRARA	6,238				

Comment:

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>		
400703072	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400703068	Directional Survey **	Yes <input checked="" type="checkbox"/> No <input 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>		
400703039	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703046	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703053	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703054	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703055	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703056	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703058	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703077	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400703280	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### General Comments

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

Total: 0 comment(s)