

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:

400708340

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 05-123-23523-00

County: WELD

Well Name: TRUMP A

Well Number: 13-10

Location: QtrQtr: NWSE Section: 13 Township: 6N Range: 64W Meridian: 6

Footage at surface: Distance: 1980 feet Direction: FSL Distance: 1880 feet Direction: FEL

As Drilled Latitude: 40.484437 As Drilled Longitude: -104.495558

## GPS Data:

Date of Measurement: 08/20/2007 PDOP Reading: 1.8 GPS Instrument Operator's Name: PAUL TAPPY

\*\* If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

\*\* If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/06/2006 Date TD: 02/09/2006 Date Casing Set or D&amp;A: 02/10/2006

Rig Release Date: 02/10/2006 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 6927 TVD\*\* Plug Back Total Depth MD 6917 TVD\*\*

Elevations GR 4650 KB 4660 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

CBL, NEU/DEN/MICROLOG, IND

## 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
SURF	12+1/4	8+5/8	24	0	447	320	0	447	VISU
1ST	7+7/8	4+1/2	11.60	0	6,919	900	2,642	4,398	CALC

## 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	2,717				
PARKMAN	3,557				
SUSSEX	4,222				
SHANNON	4,827				
NIOBRARA	6,501				
FORT HAYS	6,786				
CODELL	6,832				
GREENHORN	6,861				

Comment:

THE FORM 5 WAS NEVER SUBMITTED, THIS IS A CORRECTION. PROD CMT 750 SXS 2642-4398', 150 SXS 6332-6919'. CBL AND INDUCTION LOGS BEING SUBMITTED IN HARD COPY. PROD CMT TKT ATTACHED, NO SURFACE TKT AVAIL.

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>		
400708371	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/> No <input checked="" 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>		
400708366	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400708368	LAS-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

## General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)