

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



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Document Number:

400749149

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 05-123-39106-00

County: WELD

Well Name: NCLP

Well Number: AA06-62-1AHNC

Location: QtrQtr: SWSW Section: 4 Township: 6N Range: 63W Meridian: 6

Footage at surface: Distance: 713 feet Direction: FSL Distance: 100 feet Direction: FWL

As Drilled Latitude: 40.510480 As Drilled Longitude: -104.450876

## GPS Data:

Date of Measurement: 07/30/2014 PDOP Reading: 1.1 GPS Instrument Operator's Name: RILEY JONSSON

\*\* If directional footage at Top of Prod. Zone Dist.: 521 feet. Direction: FSL Dist.: 624 feet. Direction: FEL

Sec: 5 Twp: 6N Rng: 63W

\*\* If directional footage at Bottom Hole Dist.: 512 feet. Direction: FSL Dist.: 2386 feet. Direction: FWL

Sec: 6 Twp: 6N Rng: 63W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/01/2014 Date TD: 07/10/2014 Date Casing Set or D&amp;A: 07/13/2014

Rig Release Date: 08/14/2014 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 14502 TVD\*\* 6800 Plug Back Total Depth MD 14495 TVD\*\* 6800

Elevations GR 4709 KB 4733 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

ISUT, MUD, GR/RESISTIVITY

## 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	72	0	124	VISU
SURF	13+3/4	9+5/8	36	0	844	429	0	844	VISU
1ST	8+3/4	7	26	0	7,058	560	285	7,058	CALC
1ST LINER	6+1/8	4+1/2	11.6	6863	14,498	542	6,971	14,498	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	928				
PARKMAN	3,585				
SUSSEX	4,308				
SHANNON	4,925				
NIOBRARA	6,586				

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>					
400749240	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400749243	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>					
400749228	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749230	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749232	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749234	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749236	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749237	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749238	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749239	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400749253	DIRECTIONAL DATA	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)