

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.

Document Number:
400485929

Date Received:
09/26/2013

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 05-123-37517-00 County: WELD

Well Name: TIMBRO LD Well Number: 06-64HN

Location: QtrQtr: LOT 6 Section: 6 Township: 9N Range: 58W Meridian: 6

Footage at surface: Distance: 1980 feet Direction: FSL Distance: 255 feet Direction: FWL

As Drilled Latitude: 40.778368 As Drilled Longitude: -103.916311

GPS Data:
Date of Measurement: 09/19/2013 PDOP Reading: 1.6 GPS Instrument Operator's Name: BRANDI BINGHAM

** If directional footage at Top of Prod. Zone Dist.: 1972 feet. Direction: FSL Dist.: 975 feet. Direction: FWL

Sec: 6 Twp: 9N Rng: 58W

** If directional footage at Bottom Hole Dist.: 1995 feet. Direction: FSL Dist.: 662 feet. Direction: FEL

Sec: 5 Twp: 9N Rng: 58W

Field Name: WILDCAT Field Number: 99999

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 07/06/2013 Date TD: 07/18/2013 Date Casing Set or D&A: 07/22/2013

Rig Release Date: _____ Per Rule 308A.b.

Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 15376 TVD** 5948 Plug Back Total Depth MD 15360 TVD** 5948

Elevations GR 4900 KB 4930 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, 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	130	80	0	130	VISU
SURF	13+3/4	9+5/8	36	0	701	463	0	701	VISU
1ST	8+3/4	7	26	0	6,321	508	1,746	6,321	CALC
1ST LINER	6+1/8	4+1/2	11.6	6174	15,361	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	3,472				
SUSSEX	4,100				
SHANNON	4,547				
TEEPEE BUTTES	5,222				
NIOBRARA	5,958				

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: 9/26/2013 Email: kmills@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400485986	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400486669	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"/>
Other Attachments			
400485929	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400485946	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400485949	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400485954	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400485955	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400485977	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400485981	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400485984	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400486670	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to draft and contacted operator to upload directional survey. Current file listed as directional survey is actually corrupted CBL.	12/12/2014 9:34:21 AM
Permit	Updated Field Name to DJ Horiz. Niobrara.	12/12/2014 9:24:37 AM

Total: 2 comment(s)