

**FORM  
5**Rev  
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



Document Number:

400418111

Date Received:

05/15/2013

**DRILLING COMPLETION REPORT**

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

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 05-123-35340-00 County: WELD  
 Well Name: WELLS RANCH AA Well Number: 24-67-1HN  
 Location: QtrQtr: NWNW Section: 24 Township: 6N Range: 63W Meridian: 6  
 Footage at surface: Distance: 1073 feet Direction: FNL Distance: 370 feet Direction: FWL  
 As Drilled Latitude: 40.476350 As Drilled Longitude: -104.393070

## GPS Data:

Date of Measurement: 09/27/2012 PDOP Reading: 3.2 GPS Instrument Operator's Name: PAUL TAPPY\*\* If directional footage at Top of Prod. Zone Dist.: 1648 feet Direction: FNL Dist.: 1125 feet. Direction: FWLSec: 24 Twp: 6N Rng: 63W\*\* If directional footage at Bottom Hole Dist.: 1590 feet Direction: FNL Dist.: 545 feet. Direction: FELSec: 24 Twp: 6N Rng: 63WField Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 08/09/2012 Date TD: 08/15/2012 Date Casing Set or D&A: 08/17/2012

Rig Release Date: \_\_\_\_\_ Per Rule 308A.b.

## Well Classification:

 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  ObservationTotal Depth MD 10632 TVD\*\* 6485 Plug Back Total Depth MD 10529 TVD\*\* 6832Elevations GR 4795 KB 4825 Digital Copies of ALL Logs must be Attached per Rule 308A 

## List Electric Logs Run:

CBL, MWD, MUD

**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	24	16	75	0	130	160	0	130	VISU
SURF	13+3/4	9+5/8	36	0	658	333	0	658	VISU
1ST	8+3/4	7	26	0	6,952	575	740	6,952	CBL
1ST LINER	6+1/8	4+1/2	11.6	6839	10,530				

**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	2,510				
PARKMAN	3,701				
SUSSEX	4,462				
SHANNON	4,973				
NIOBRARA	6,650				
TEEPEE BUTTES	6,859				

Operator Comments

\_\_\_\_\_

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: 5/15/2013

Email: kmills@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
400418143	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400418145	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"/>
<b><u>Other Attachments</u></b>			
400418111	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418134	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418135	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418138	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418139	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418140	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418538	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418547	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400418549	LAS-MUD	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)