

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:

400424873

Date Received:

05/28/2013

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 05-123-35639-00 County: WELD
Well Name: Wells Ranch Well Number: AE08-65-1HN
Location: QtrQtr: SWSW Section: 8 Township: 6N Range: 62W Meridian: 6
Footage at surface: Distance: 1172 feet Direction: FSL Distance: 215 feet Direction: FWL
As Drilled Latitude: 40.497190 As Drilled Longitude: -104.355140

GPS Data:
Date of Measurement: 09/25/2012 PDOP Reading: 3.8 GPS Instrument Operator's Name: PAUL TAPPY

** If directional footage at Top of Prod. Zone Dist.: 2317 feet Direction: FSL Dist.: 894 feet Direction: FWL
Sec: 8 Twp: 6N Rng: 62W

** If directional footage at Bottom Hole Dist.: 2312 feet Direction: FSL Dist.: 536 feet Direction: FEL
Sec: 8 Twp: 6N Rng: 62W

Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 09/14/2012 Date TD: 11/03/2012 Date Casing Set or D&A: 11/03/2012
Rig Release Date: Per Rule 308A.b.

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

Total Depth MD 11235 TVD** 6684 Plug Back Total Depth MD 11235 TVD** 6684

Elevations GR 4929 KB 4959 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
CBL, MUD, MWD/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
SURF	13+3/4	9+5/8	36	0	752	335	0	752	VISU
1ST	8+3/4	7	26	0	7,242	570	1,256	7,242	CBL
1ST LINER	6+1/8	4+1/2	11.6	7104	11,235				

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	2,650				
PARKMAN	3,750				
SUSSEX	4,600				
SHANNON	5,200				
TEEPEE BUTTES	6,190				
SHARON SPRINGS	6,760				
NIOBRARA	6,852				

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: 5/28/2013

Email: kmills@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400424913	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400424915	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			
400424873	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400424901	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400424904	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400424910	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400424911	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400424916	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
#Error	asusted formation tops per mud log	1/12/2015 11:41:09 AM
#Error	Corrected BHL footages to reflect directional survey reported values. Corrected PBTVD to reflect directional survey.	1/9/2015 1:59:40 PM

Total: 2 comment(s)