

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



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Document Number:
400419678

Date Received:
05/28/2013

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: EILEEN ROBERTS
 Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330
 Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286
 City: DENVER State: CO Zip: 80202

API Number 05-123-35644-00 County: WELD
 Well Name: Wells Ranch Well Number: AE08-68-1HN
 Location: QtrQtr: SWNW Section: 8 Township: 6N Range: 62W Meridian: 6
 Footage at surface: Distance: 1485 feet Direction: FNL Distance: 273 feet Direction: FWL
 As Drilled Latitude: 40.504370 As Drilled Longitude: -104.354960

GPS Data:
 Date of Measurement: 10/29/2012 PDOP Reading: 2.4 GPS Instrument Operator's Name: Paul Tappy

** If directional footage at Top of Prod. Zone Dist.: 969 feet. Direction: FNL Dist.: 852 feet. Direction: FWL
 Sec: 8 Twp: 6N Rng: 62W
 ** If directional footage at Bottom Hole Dist.: 985 feet. Direction: FNL Dist.: 534 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) 09/08/2012 Date TD: 10/02/2012 Date Casing Set or D&A: 10/03/2012
 Rig Release Date: 10/03/2012 Per Rule 308A.b.

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

Total Depth MD 11201 TVD** 6761 Plug Back Total Depth MD 11201 TVD** 6761
 Elevations GR 4987 KB 5017 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, MWD, Gamma.

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	42.05	0	130	160	0	130	VISU
SURF	13+3/4	9+5/8	36	0	823	386	0	823	VISU
1ST	8+3/4	7	26	0	7,220	560	1,280	7,220	CBL
1ST LINER	6+1/8	4+1/2	11.60	7296	11,191				

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	2,683				
PARKMAN	3,784				
SUSSEX	4,649				
SHANNON	5,186				
NIOBRARA	6,804				

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Eileen Roberts

Title: Regulatory Analyst I Date: 5/28/2013 Email: eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400419900	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400419902	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			
400419678	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419790	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419795	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419815	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419823	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419828	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419906	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400768654	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400769116	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400769118	PDF-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)