

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



Document Number:

400473442

Date Received:

09/24/2013

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 05-123-36972-00 County: WELD
 Well Name: MCCLELLAN Well Number: LG09-72HN
 Location: QtrQtr: NENE Section: 9 Township: 8N Range: 59W Meridian: 6
 Footage at surface: Distance: 360 feet Direction: FNL Distance: 275 feet Direction: FEL
 As Drilled Latitude: 40.683108 As Drilled Longitude: -103.972867

GPS Data:

Date of Measurement: 07/31/2013 PDOP Reading: 2.8 GPS Instrument Operator's Name: BRANDI BINGHAM** If directional footage at Top of Prod. Zone Dist.: 820 feet Direction: FNL Dist.: 634 feet Direction: FELSec: 9 Twp: 8N Rng: 59W** If directional footage at Bottom Hole Dist.: 718 feet Direction: FSL Dist.: 660 feet Direction: FELSec: 9 Twp: 8N Rng: 59WField Name: DJ HORIZONTAL NIOBRARA Field Number: 16950

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 06/01/2013 Date TD: 06/09/2013 Date Casing Set or D&A: 06/10/2013

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

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ ObservationTotal Depth MD 10307 TVD** 6082 Plug Back Total Depth MD 10289 TVD** 6082Elevations GR 4829 KB 4859 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	1,258	550	0	1,258	VISU
1ST	8+3/4	7	26	0	6,471	531	1,236	6,471	CBL
1ST LINER	6+1/8	4+1/2	11.6	6368	10,289				

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	1,762				
PARKMAN	3,341				
SUSSEX	3,801				
SHANNON	4,572				
TEEPEE BUTTES	5,327				
SHARON SPRINGS	6,080				
NIOBRARA	6,138				

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: 9/24/2013 Email: kmills@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400473615	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400484809	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>					
400473442	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473469	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473482	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473484	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473486	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473487	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473488	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473489	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400473666	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400484810	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	Operator confirmed spud date is 6/1/2013.	1/13/2015 7:54:15 AM
#Error	Requested spud date review.	1/9/2015 2:10:41 PM

Total: 2 comment(s)