

FORM 5A
Rev 06/12

State of Colorado
Oil and Gas Conservation Commission

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10/30/2013

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100322
 2. Name of Operator: NOBLE ENERGY INC
 3. Address: 1625 BROADWAY STE 2200
 City: DENVER State: CO Zip: 80202
 4. Contact Name: Kathleen Mills
 Phone: (720) 587-2226
 Fax: (303) 228-4286
 Email: kmills@nobleenergyinc.com

5. API Number 05-123-36299-00
 6. County: WELD
 7. Well Name: TREBOR B
 Well Number: 11-67-1HN
 8. Location: QtrQtr: SWNW Section: 11 Township: 5N Range: 64W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/26/2013 End Date: 09/26/2013 Date of First Production this formation: 10/14/2013

Perforations Top: 7179 Bottom: 10957 No. Holes: 0 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

FRAC'D W/3184367 GAL PERMSTIM AND SLICK WATER AND 4237031# OTTAWA SAND

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 75818 Max pressure during treatment (psi): 6035

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.89

Total acid used in treatment (bbl): _____ Number of staged intervals: 18

Recycled water used in treatment (bbl): 4531 Flowback volume recovered (bbl): 2010

Fresh water used in treatment (bbl): 71287 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 4237031 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 10/17/2013 Hours: 24 Bbl oil: 239 Mcf Gas: 326 Bbl H2O: 232

Calculated 24 hour rate: Bbl oil: 239 Mcf Gas: 326 Bbl H2O: 232 GOR: 1364

Test Method: FLOWING Casing PSI: 1490 Tubing PSI: 1480 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1108 API Gravity Oil: 38

Tubing Size: 2 + 7/8 Tubing Setting Depth: 6855 Tbg setting date: 10/10/2013 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

Comment:

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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: 10/30/2013 Email: kmills@nobleenergyinc.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400505032	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

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