

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Table with columns DE, ET, OE, ES

Document Number: 400543276

Date Received: 01/21/2014

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: Eileen Roberts
Phone: (303) 2284330
Fax: (303) 2284286
Email: eroberts@nobleenergyinc.com

5. API Number 05-123-37132-00
6. County: WELD
7. Well Name: Crow Creek State AC
Well Number: 36-76HN
8. Location: QtrQtr: SESW Section: 36 Township: 7N Range: 63W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/09/2013 End Date: 11/09/2013 Date of First Production this formation: 12/15/2013

Perforations Top: 7094 Bottom: 10964 No. Holes: 0 Hole size:

Provide a brief summary of the formation treatment: Open Hole: []

Frac'd the Niobrara w/ 2605057 gals of PermStim and Slick Water with 3660920#'s of Ottawa sand.

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 62025 Max pressure during treatment (psi): 5207
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): 0.87
Total acid used in treatment (bbl): Number of staged intervals: 20
Recycled water used in treatment (bbl): 3713 Flowback volume recovered (bbl): 319
Fresh water used in treatment (bbl): 58312 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 3660920 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/26/2013 Hours: 24 Bbl oil: 272 Mcf Gas: 218 Bbl H2O: 319
Calculated 24 hour rate: Bbl oil: 272 Mcf Gas: 218 Bbl H2O: 319 GOR: 801
Test Method: FLOWING Casing PSI: 853 Tubing PSI: 209 Choke Size: 20/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1290 API Gravity Oil: 45
Tubing Size: 2 + 7/8 Tubing Setting Depth: 6861 Tbg setting date: 12/03/2013 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: Eileen Roberts

Title: Regulatory Specialist Date: 1/21/2014 Email: eroberts@nobleenergyinc.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400543276	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

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