

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:
400377775
Date Received:
02/05/2013

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 05-123-34791-00 County: WELD
Well Name: WELLS RANCH Well Number: AF08-69-1HN
Location: QtrQtr: NWNW Section: 8 Township: 5N Range: 62W Meridian: 6
Footage at surface: Distance: 443 feet Direction: FNL Distance: 353 feet Direction: FWL
As Drilled Latitude: 40.420080 As Drilled Longitude: -104.355380

GPS Data:
Date of Measurement: 06/01/2012 PDOP Reading: 5.0 GPS Instrument Operator's Name: Paul Tappy

** If directional footage at Top of Prod. Zone Dist.: 298 feet. Direction: FNL Dist.: 1191 feet. Direction: FWL
Sec: 8 Twp: 5N Rng: 62W
** If directional footage at Bottom Hole Dist.: 986 feet. Direction: FNL Dist.: 537 feet. Direction: FEL
Sec: 8 Twp: 5N Rng: 62W

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

Spud Date: (when the 1st bit hit the dirt) 04/18/2012 Date TD: 04/28/2012 Date Casing Set or D&A: 05/02/2012
Rig Release Date: 05/02/2012 Per Rule 308A.b.

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

Total Depth MD 16418 TVD** 6457 Plug Back Total Depth MD 16418 TVD** 6457

Elevations GR 4664 KB 4688 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
GRL/CCL/CBL/VDL.

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	18+1/2	16	84	24	124	80	0	124	
SURF	13+3/4	9+5/8	36	24	659	359	0	659	
1ST	8+3/4	7	26	24	7,066	565	630	7,066	CBL
1ST LINER	6+1/8	4+1/2	11.6	6663	11,123				

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	
FOX HILLS BASE	502				
PARKMAN	4,482				
SUSSEX	4,948				
SHANNON	5,783				
NIOBRARA	6,729				

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 Specialist Date: 2/5/2013 Email: eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400378125	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400378121	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			
400377775	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400378087	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400378131	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400791716	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400791717	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400791718	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400791719	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400791720	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	1) Cement job summary is for incorrect well. 2) No GR or mud log attached. Contacted operator. Returned to draft.	2/10/2015 4:11:25 PM
Permit	Req'd MWD log.	5/30/2014 6:56:30 AM
Permit	Any logs other than CBL run?	12/30/2013 1:50:45 PM

Total: 3 comment(s)