<table>
<tr><td rowspan="3">FORM 5
Rev 09/14</td><td colspan="2">State of Colorado
Oil and Gas Conservation Commission</td><td>DNR / CO / DE ET OE ES</td></tr>
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FORM 5 Rev 09/14	State of Colorado

State of Colorado
Oil and Gas Conservation Commission

FORM 5 Rev 09/14

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

DRILLING COMPLETION REPORT

DE	ET	OE	ES

Document Number:

400786209

Date Received:

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: 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 05-123-07362-00   County: WELD

Well Name: Bradbury   Well Number: 1

Location: QtrQtr: NWSE   Section: 15   Township: 9N   Range: 58W   Meridian: 6

Footage at surface: Distance: 1980 feet Direction: FSL   Distance: 1980 feet Direction: FEL

As Drilled Latitude: _____   As Drilled Longitude: _____

GPS Data:

Date of Measurement: _____   PDOP Reading: _____   GPS Instrument Operator's Name: _____

** If directional footage at Top of Prod. Zone   Dist.: _____ feet. Direction: _____   Dist.: _____ feet. Direction: _____

Sec: _____   Twp: _____   Rng: _____

** If directional footage at Bottom Hole   Dist.: _____ feet. Direction: _____   Dist.: _____ feet. Direction: _____

Sec: _____   Twp: _____   Rng: _____

Field Name: WILDCAT   Field Number: 99999

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 10/05/1971 Date TD: 10/12/1971 Date Casing Set or D&A: 10/12/1971

Rig Release Date: 10/12/1971 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth	MD	6370	TVD**		Plug Back Total Depth	MD	6370	TVD**	

Elevations	GR	4678	KB	4688	**Digital Copies of ALL Logs must be Attached per Rule 308A**	☐

List Electric Logs Run:

NO LOGS RUN

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
SURF	9+3/4	8+5/8	24	0	80	75	0	80	VISU

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
SQUEEZE	SURF	65	44	0	65
1 INCH	SURF	236	115	0	263
1 INCH	SURF	621	336	236	621
1 INCH	OPEN HOLE	3,023	100	2,834	3,023

Details of work:

1/21/2014 THREE CEMENT PLUGS SET.
1/29/2014 SQUEEZE CEMENT THRU SURFACE CASING, NO PERF HOLES. GOOD CEMENT TO SURFACE.
NO NEW LOGS RUN, PLAN TO P&A WELL.

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	

Comment:

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: _____   Email: kmills@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			

Attachment Checklist

Att Doc Num	Document Name			attached ?	
400787344	CMT Summary *	Yes ☒	No ☐		
	Core Analysis	Yes ☐	No ☒		
	Directional Survey **	Yes ☐	No ☒		
	DST Analysis	Yes ☐	No ☒		
	Logs	Yes ☐	No ☒		
	Other	Yes ☐	No ☒		

General Comments

User Group	**Comment**	**Comment Date**

Total: 0 comment(s)