

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:

400544307

Date Received:

01/23/2014

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: 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 05-123-37528-00 County: WELD
 Well Name: ROHN STATE Well Number: LD09-64-1HN
 Location: QtrQtr: NESE Section: 9 Township: 9N Range: 58W Meridian: 6
 Footage at surface: Distance: 2050 feet Direction: FSL Distance: 480 feet Direction: FEL
 As Drilled Latitude: 40.764213 As Drilled Longitude: -103.861654

GPS Data:

Date of Measurement: 01/09/2014 PDOP Reading: 1.6 GPS Instrument Operator's Name: Riley Josson

** If directional footage at Top of Prod. Zone Dist.: 1589 feet Direction: FSL Dist.: 1132 feet. Direction: FEL

Sec: 9 Twp: 9N Rng: 58W

** If directional footage at Bottom Hole Dist.: 1662 feet Direction: FSL Dist.: 660 feet. Direction: FWL

Sec: 9 Twp: 9N Rng: 58W

Field Name: DJ HORIZONTAL NIOBRARA Field Number: 16950

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 10/31/2013 Date TD: 11/06/2013 Date Casing Set or D&A: 11/07/2013

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

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 9687 TVD** 5748 Plug Back Total Depth MD 9687 TVD** 5748

Elevations GR 4716 KB 4746 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:

CBL/Mud/Gamma

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	24	16	42.09	0	130	80	0	130	VISU
SURF	13+3/4	9+5/8	36	0	1,255	524	0	1,244	VISU
1ST	8+3/4	7	26	0	6,144	495	1,752	6,144	CBL
1ST LINER	6+1/8	4+1/2	11.6	6062	9,672				

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	2,197				
PARKMAN	3,286				
SUSSEX	3,933				
SHANNON	4,350				
NIOBRARA	5,732				

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: Eileen Roberts

Title: Regulatory Specialist Date: 1/23/2014 Email: eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400544763	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400544764	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>			
400544307	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544739	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544744	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544745	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544751	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544754	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544756	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544758	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544762	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400544767	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	casing information updated per Gamma ray log.	3/3/2015 4:16:06 PM
Permit	Changed field name to DJ Horiz. Niobrara.	2/24/2015 3:33:11 PM

Total: 2 comment(s)