

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:
400414346

Date Received:
05/09/2013

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: JEAN MUSE-REYNOLDS
 Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4316
 Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
 City: DENVER State: CO Zip: 80202

API Number 05-123-35817-00 County: WELD
 Well Name: LONGS AC Well Number: 02-15
 Location: QtrQtr: SWSE Section: 2 Township: 7N Range: 63W Meridian: 6
 Footage at surface: Distance: 660 feet Direction: FSL Distance: 1920 feet Direction: FEL
 As Drilled Latitude: 40.597601 As Drilled Longitude: -104.401140

GPS Data:
 Date of Measurement: 08/08/2012 PDOP Reading: 1.6 GPS Instrument Operator's Name: PAUL TAPPY

** 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: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 07/21/2012 Date TD: 07/31/2012 Date Casing Set or D&A: 08/04/2012
 Rig Release Date: _____ Per Rule 308A.b.

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

Total Depth MD 8910 TVD** _____ Plug Back Total Depth MD 8798 TVD** _____

Elevations GR 4837 KB 4850 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
TRIPLE COMBO
CEMENT LOG

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	13+1/2	9+5/8	36	13	754	378	0	754	
1ST	8+3/4	7+0/0	26	13	8,896	757	8,807	8,896	CBL

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	2,617				
PARKMAN	3,624				
SUSSEX	4,529				
SHANNON	5,081				
TEEPEE BUTTES	5,913				
NIOBRARA	6,622				
CODELL	6,895				
J SAND	7,330				
LYONS	8,608				

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: JEAN MUSE-REYNOLDS

Title: Regulatory Compliance

Date: 5/9/2013

Email: jmuse@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400415441	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" 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			
400414346	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400415366	PDF-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400415368	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400415516	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400415905	PDF-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400807868	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400807871	LAS-COMBINATION OPEN HOLE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400807872	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400807880	LAS-COMBINATION OPEN HOLE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Form returned to draft in order for operator to make corrections/updates.	2/19/2015 10:09:15 AM
Permit	ON HOLD: Well is an exploratory, nonproducing well. Doc #: 400475081	5/19/2014 9:30:40 AM
Permit	re-erquested final form 5, and withdrawl of prelim 5	5/19/2014 8:08:04 AM
Permit	Requested information on final form 5.	6/17/2013 1:10:16 PM

Total: 4 comment(s)