

**FORM
5**Rev
09/14**State of Colorado****Oil and Gas Conservation Commission**

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Document Number:

400574283

Date Received:

03/20/2014

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: 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 05-123-37208-00

County: WELD

Well Name: WELLS RANCH AE

Well Number: 20-63-1HN

Location: QtrQtr: NWSW Section: 20 Township: 6N Range: 62W Meridian: 6

Footage at surface: Distance: 1643 feet Direction: FSL Distance: 215 feet Direction: FWL

As Drilled Latitude: 40.469477 As Drilled Longitude: -104.355324

GPS Data:

Date of Measurement: 01/09/2014 PDOP Reading: 0.9 GPS Instrument Operator's Name: RILEY JONSSON

** If directional footage at Top of Prod. Zone Dist.: 1005 feet Direction: FSL Dist.: 958 feet Direction: FWL

Sec: 20 Twp: 6N Rng: 62W

** If directional footage at Bottom Hole Dist.: 989 feet Direction: FSL Dist.: 536 feet Direction: FEL

Sec: 20 Twp: 6N Rng: 62W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 09/20/2013 Date TD: 09/25/2013 Date Casing Set or D&A: 09/26/2013

Rig Release Date: Per Rule 308A.b.

Well Classification:

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

Total Depth MD 10769 TVD** 6570 Plug Back Total Depth MD 10769 TVD** 6570

Elevations GR 4785 KB 4809 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MUD. GR

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	26	16	42.09	0	124	80	0	124	VISU
SURF	13+3/4	9+5/8	36	0	961	485	0	961	VISU
1ST	8+3/4	7	26	0	7,033	565	806	7,033	CBL
1ST LINER	6+1/8	4+1/2	11.6	6968	10,754				

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	1,074				
PARKMAN	3,549				
SUSSEX	4,095				
SHANNON	4,894				
TEEPEE BUTTES	5,930				
NIOBRARA	6,541				

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: Kathleen Mills

Title: Regulatory Analyst Date: 3/20/2014 Email: kmills@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400575178	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400574328	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>		
400574283	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574314	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574316	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574318	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574320	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574322	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574324	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574325	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400574332	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400575177	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

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

Total: 0 comment(s)