

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:

400556522

Date Received:

02/18/2014

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 05-123-37214-00

County: WELD

Well Name: WELLS RANCH AE

Well Number: 20-67-1HN

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

Footage at surface: Distance: 1248 feet Direction: FNL Distance: 215 feet Direction: FWL

As Drilled Latitude: 40.476100 As Drilled Longitude: -104.355204

GPS Data:

Date of Measurement: 01/23/2014 PDOP Reading: 5.0 GPS Instrument Operator's Name: RILEY JONSSON

** If directional footage at Top of Prod. Zone Dist.: 1631 feet Direction: FNL Dist.: 852 feet Direction: FWL

Sec: 20 Twp: 6N Rng: 62W

** If directional footage at Bottom Hole Dist.: 1664 feet Direction: FNL Dist.: 535 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) 09/28/2013 Date TD: 10/04/2013 Date Casing Set or D&A: 10/05/2013

Rig Release Date: Per Rule 308A.b.

Well Classification:

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

Total Depth MD 10976 TVD** 6673 Plug Back Total Depth MD 10976 TVD** 6673

Elevations GR 4841 KB 4871 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	42.05	0	130	60	0	130	VISU
SURF	13+3/4	9+5/8	36	0	972	477	0	972	VISU
1ST	8+3/4	7	26	0	7,044	580	652	7,044	CBL
1ST LINER	6+1/8	4+1/2	11.6	6947	10,961				

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF		52	0	972

Details of work:

Top Off Job: Original cementing of 477 sacks did not have cement returns to surface; another 52 sacks to top off to surface for a total of 529 sacks of cement used on surface casing.

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	1,119				
PARKMAN	3,583				
SUSSEX	4,110				
SHANNON	4,902				
TEEPEE BUTTES	5,938				
NIOBRARA	6,573				

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: 2/18/2014 Email: kmills@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400556667	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400556668	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>					
400556522	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556626	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556663	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556664	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556665	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556669	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556762	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556764	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556765	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400556768	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	requested cement summary to show actual sacks used during surface cmt job & returns to surface by 3/20/2015. Added top out job to remedial cement tab per Description of Job Events provided 3/17/2015.	3/13/2015 10:53:54 AM

Total: 1 comment(s)