

FORM
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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



Document Number:

400496866

Date Received:

10/16/2013

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: Julie Webb
Name of Operator: NOBLE ENERGY INC Phone: (720) 587-2316
Address: 1625 BROADWAY STE 2200 Fax:
City: DENVER State: CO Zip: 80202

API Number 05-123-26659-00 County: WELD
Well Name: TREBOR B Well Number: 11-19
Location: QtrQtr: NENW Section: 11 Township: 5N Range: 64W Meridian: 6
Footage at surface: Distance: 1320 feet Direction: FNL Distance: 1320 feet Direction: FWL
As Drilled Latitude: 40.417473 As Drilled Longitude: -104.522294

GPS Data:
Date of Measurement: 01/04/2008 PDOP Reading: 3.8 GPS Instrument Operator's Name: Brian DeRose

** 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: KERSEY Field Number: 44600
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/30/2007 Date TD: 01/03/2008 Date Casing Set or D&A: 01/03/2008
Rig Release Date: Per Rule 308A.b.

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

Total Depth MD 6910 TVD** Plug Back Total Depth MD 6887 TVD**
Elevations GR 4599 KB 4609 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
CBL

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	12+1/4	8+5/8	24	0	470	352	0	470	CALC
1ST	7+7/8	4+1/2	11.6	0	6,903	900	1,954	6,903	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 08/29/2013

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	S.C. 1.1	1,230	175	572	1,230

Details of work:

Control well w/kill fluid. RIH w/ blade bit, and scraper. Tagged fill at 6409' KB. TIH w/ RBP, retrieved head, 2 3/8" tubing. Set RBP @ 6409' KB. Dump 2 sks sand on top. Pressure test to 1500#. Roll hole. Unland casing. Pick Up mule shoe and TIH w/40 jts of 1 1/4" to 1230'. Test lines to 3000 psi. Pump 5bbl water ahead. Pump 175 sks of "G" neat 15.8 ppg cement from 1230' to 572'. Bond log from 2000' to surface. RIH w/ retrieving head and establish circulation and latch onto RBP. Roll hole clean and release RBP. Land 2 3/8" 4.7 # J-55 tubing to 6719' KB. Rig down and move off.

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	

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: Julie Webb

Title: Regulatory Analyst Date: 10/16/2013 Email: MClark@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400496943	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"/>
<u>Other Attachments</u>			
400496866	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400496888	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)