

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



Document Number:

400590347

Date Received:

04/16/2014

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 05-123-37424-00 County: WELD  
Well Name: CROW CREEK STATE AC Well Number: 36-72-1HN  
Location: QtrQtr: SWSE Section: 36 Township: 7N Range: 63W Meridian: 6  
Footage at surface: Distance: 270 feet Direction: FSL Distance: 1350 feet Direction: FEL  
As Drilled Latitude: 40.523626 As Drilled Longitude: -104.379704

GPS Data:  
Date of Measurement: 08/26/2013 PDOP Reading: 1.7 GPS Instrument Operator's Name: BRANDI BINGHAM

\*\* If directional footage at Top of Prod. Zone Dist.: 840 feet Direction: FSL Dist.: 341 feet Direction: FEL  
Sec: 36 Twp: 7N Rng: 63W  
\*\* If directional footage at Bottom Hole Dist.: 535 feet Direction: FNL Dist.: 298 feet Direction: FEL  
Sec: 36 Twp: 7N Rng: 63W

Field Name: WATTENBERG Field Number: 90750  
Federal, Indian or State Lease Number: 9804.8

Spud Date: (when the 1st bit hit the dirt) 11/16/2013 Date TD: 11/23/2013 Date Casing Set or D&A: 11/24/2013  
Rig Release Date: Per Rule 308A.b.

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

Total Depth MD 11214 TVD\*\* 6784 Plug Back Total Depth MD 11214 TVD\*\* 6784  
Elevations GR 4850 KB 4874 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	75	0	122	80	0		VISU
SURF	13+3/4	9+5/8	36	0	598	337	0	598	VISU
1ST	8+3/4	7	26	0	7,178	604	602	7,178	CBL
1ST LINER	6+1/8	4+1/2	11.6	7111	11,199				

**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	2,549				
PARKMAN	3,633				
SUSSEX	4,418				
SHANNON	5,055				
TEEPEE BUTTES	5,969				
NIOBRARA	6,880				

Operator Comments

GPS TAKEN ON CONDUCTOR

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: 4/16/2014

Email: kmills@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400590429	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400590430	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>			
400590347	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590421	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590422	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590423	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590424	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590425	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590426	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590428	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400590432	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Corrected TPZ footage to reflect directional survey reported value.	3/19/2015 8:34:10 AM

Total: 1 comment(s)