

**FORM
5A**
Rev
06/12

**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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05/30/2013

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100322
2. Name of Operator: NOBLE ENERGY INC
3. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202
4. Contact Name: JEAN MUSE-REYNOLDS
Phone: (303) 228-4316
Fax: (303) 228-4286
Email: jmuse@nobleenergyinc.com

5. API Number 05-123-35624-00
6. County: WELD
7. Well Name: ADAMS D
Well Number: 30-30D
8. Location: QtrQtr: NENW Section: 30 Township: 3N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/10/2012 End Date: 09/10/2012 Date of First Production this formation: 09/25/2012

Perforations Top: 7508 Bottom: 7522 No. Holes: 56 Hole size: 0.4

Provide a brief summary of the formation treatment: _____ Open Hole:

Frac'd 7 Stages. PUMPED 244777# OTTAWA SAND DOWNHOLE in 124944gals of 15%
HCL/Vistar/GELLED/SLICK/RECYCLED/FRESH WATER FLOWBACK VOLUMES REPORTED ON NIOBRARA PANEL
CODELL IS PRODUCING THROUGH COMPOSITE FLOW-THROUGH PLUG

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 2975 Max pressure during treatment (psi): 3952

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.86

Total acid used in treatment (bbl): 12 Number of staged intervals: 7

Recycled water used in treatment (bbl): 252 Flowback volume recovered (bbl): 1262

Fresh water used in treatment (bbl): 2711 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 244777 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

**** Bridge Plug Depth: ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.**

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: 09/25/2012

Perforations Top: 7278 Bottom: 7522 No. Holes: 104 Hole size: 0.4

Provide a brief summary of the formation treatment: _____ Open Hole:

FLOWBACK VOLUMES REPORTED ON NIOBRARA PANEL
CODELL IS PRODUCING THROUGH COMPOSITE FLOW-THROUGH PLUG

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____ Number of staged intervals: _____

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____

Total proppant used (lbs): _____ Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 09/26/2012 Hours: 24 Bbl oil: 43 Mcf Gas: 166 Bbl H2O: 61

Calculated 24 hour rate: Bbl oil: 43 Mcf Gas: 166 Bbl H2O: 61 GOR: 3860

Test Method: FLOWING Casing PSI: 350 Tubing PSI: 0 Choke Size: 12/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1246 API Gravity Oil: 52

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/10/2012 End Date: 09/10/2012 Date of First Production this formation: 09/25/2012

Perforations Top: 7278 Bottom: 7378 No. Holes: 48 Hole size: 0.4

Provide a brief summary of the formation treatment: Open Hole:

Frac'd 7 Stages. PUMPED 245075# OTTAWA SAND DOWNHOLE in 153938gals of Vistar/GELLED/SLICK/RECYCLED/FRESH WATER FLOWBACK VOLUMES REPORTED ON NIOBRARA PANEL CODELL IS PRODUCING THROUGH COMPOSITE FLOW-THROUGH PLUG

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 3665 Max pressure during treatment (psi): 4444

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: Min frac gradient (psi/ft): 0.91

Total acid used in treatment (bbl): 0 Number of staged intervals: 7

Recycled water used in treatment (bbl): 264 Flowback volume recovered (bbl): 1262

Fresh water used in treatment (bbl): 3401 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 245075 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

Comment:

FLOWBACK VOLUMES REPORTED ON NIOBRARA PANEL.

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: 5/30/2013 Email: jmuse@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name
400420873	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Flowback information added to the Codell formation tab.	4/9/2015 8:46:12 AM
Permit	ON HOLD: Waiting on flowback for Codell formation.	4/24/2014 1:08:05 PM

Total: 2 comment(s)