

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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Date Received:

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: Eileen Roberts Phone: (303) 2284330 Fax: (303) 2284286 Email: eroberts@nobleenergyinc.com

5. API Number 05-123-39758-00 6. County: WELD 7. Well Name: Nalen State Well Number: LD12-76-1AHN 8. Location: QtrQtr: SESW Section: 1 Township: 9N Range: 58W Meridian: 6 9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 02/27/2015 End Date: 03/05/2015 Date of First Production this formation: 03/27/2015 Perforations Top: 5976 Bottom: 10202 No. Holes: 0 Hole size:

Provide a brief summary of the formation treatment: Open Hole: [X]

Frac'd the Niobrara w/ 4363545 gals of Silverstim and Slick Water with 3047150#'s of Ottawa sand.

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 103893 Max pressure during treatment (psi): 5795 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.43 Type of gas used in treatment: Min frac gradient (psi/ft): 0.76 Total acid used in treatment (bbl): 0 Number of staged intervals: 23 Recycled water used in treatment (bbl): 3468 Flowback volume recovered (bbl): 224 Fresh water used in treatment (bbl): 100425 Disposition method for flowback: RECYCLE Total proppant used (lbs): 3047150 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/03/2015 Hours: 24 Bbl oil: 353 Mcf Gas: 81 Bbl H2O: 405 Calculated 24 hour rate: Bbl oil: 353 Mcf Gas: 81 Bbl H2O: 405 GOR: 229 Test Method: FLOWING Casing PSI: 33 Tubing PSI: 383 Choke Size: 18/64 Gas Disposition: SOLD Gas Type: WET Btu Gas: 2768 API Gravity Oil: 38 Tubing Size: 2 + 3/8 Tubing Setting Depth: 5744 Tbg setting date: 03/26/2015 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:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Eileen Roberts

Title: Regulatory Analyst I Date: _____ Email: eroberts@nobleenergyinc.com
:

Attachment Check List

Att Doc Num **Name**

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User Group **Comment** **Comment Date**

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