

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:

400635522

Date Received:

06/30/2014

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: EILEEN ROBERTS
Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330
Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286
City: DENVER State: CO Zip: 80202

API Number 05-123-37597-00 County: WELD
Well Name: Wells Ranch AA Well Number: 21-63-1HN
Location: QtrQtr: SESE Section: 21 Township: 6N Range: 63W Meridian: 6
Footage at surface: Distance: 988 feet Direction: FSL Distance: 525 feet Direction: FEL
As Drilled Latitude: 40.467576 As Drilled Longitude: -104.434166

GPS Data:
Date of Measurement: 12/02/2013 PDOP Reading: 4.0 GPS Instrument Operator's Name: Brianne Holmaan

** If directional footage at Top of Prod. Zone Dist.: 976 feet Direction: FSL Dist.: 821 feet Direction: FEL
Sec: 21 Twp: 6N Rng: 63W
** If directional footage at Bottom Hole Dist.: 987 feet Direction: FSL Dist.: 537 feet Direction: FWL
Sec: 21 Twp: 6N Rng: 63W

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

Spud Date: (when the 1st bit hit the dirt) 01/15/2014 Date TD: 01/21/2014 Date Casing Set or D&A: 01/22/2014
Rig Release Date: Per Rule 308A.b.

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

Total Depth MD 10983 TVD** 6714 Plug Back Total Depth MD 10983 TVD** 6714
Elevations GR 4730 KB 4754 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
CBL/Mud/Gamma

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	42.09	0	124	72	0	124	VISU
SURF	13+3/4	9+5/8	36	0	948	418	0	948	VISU
1ST	8+3/4	7	26	0	6,691	575	1,236	6,691	CBL
1ST LINER	6+1/8	4+1/2	11.6	6878	10,973				

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	1,033				
PARKMAN	3,547				
SUSSEX	4,098				
SHANNON	4,841				
NIOBRARA	6,643				

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: Eileen Roberts

Title: Regulatory Specialist Date: 6/30/2014 Email: eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400635798	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400635814	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>			
400635522	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400635672	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400635673	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400635682	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400635683	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400635688	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400635693	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400635860	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	Updated bottom hole location (BHL) to reflect diractional survey.	4/21/2015 11:44:59 AM

Total: 1 comment(s)