

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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Document Number:

400316633

Date Received:

08/16/2012

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: Andrea Rawson  
Phone: (303) 228-4253  
Fax: (303) 228-4286  
Email: arawson@nobleenergyinc.com

5. API Number 05-123-17623-00  
6. County: WELD  
7. Well Name: ROTHE  
Well Number: 2-10  
8. Location: QtrQtr: NWSE Section: 2 Township: 4N Range: 64W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION  
Treatment Date: 01/05/2012 End Date: 01/07/2012 Date of First Production this formation: 01/08/1994  
Perforations Top: 6802 Bottom: 6816 No. Holes: 100 Hole size: 0.27

Provide a brief summary of the formation treatment:

Open Hole: ☐

Re-Frac'd Codell w/ 141865 gals of Slick Water, Vistar, and 15% HCl with 246884#'s of Ottawa sand

Initial Frac, 53424 gals of Fresh Water with 192400#'s of Ottawa sand. Information below is the total of the two Frac's.

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 4650

Max pressure during treatment (psi): 4490

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): 0.76

Total acid used in treatment (bbl): 24

Number of staged intervals: 7

Recycled water used in treatment (bbl): 266

Flowback volume recovered (bbl): 75

Fresh water used in treatment (bbl): 4384

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 246884

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: FRACTURE STIMULATION

Treatment Date: 01/08/2012 End Date: 01/27/2012 Date of First Production this formation: 03/02/2012

Perforations Top: 6532 Bottom: 6816 No. Holes: 196 Hole size:

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

Commingled Niobrara-Codell

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: 03/02/2012 Hours: 24 Bbl oil: 69 Mcf Gas: 207 Bbl H2O: 9

Calculated 24 hour rate: Bbl oil: 69 Mcf Gas: 207 Bbl H2O: 9 GOR: 3000

Test Method: Flowing Casing PSI: 1412 Tubing PSI: 668 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1290 API Gravity Oil: 55

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6778 Tbg setting date: 02/03/2012 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: 01/27/2012 End Date: 01/27/2012 Date of First Production this formation: 02/27/2012

Perforations Top: 6532 Bottom: 6689 No. Holes: 96 Hole size: 0.27

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

Frac'd Niobrara w/ 159382 gals of Slick Water, Vistar, and 15% HCl with 246102#'s of Ottawa sand.

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 3795 Max pressure during treatment (psi): 4492

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): 0.81

Total acid used in treatment (bbl): 24 Number of staged intervals: 8

Recycled water used in treatment (bbl): 265 Flowback volume recovered (bbl): 75

Fresh water used in treatment (bbl): 3530 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 246102 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:

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

Signed: Print Name: Andrea Rawson

Title: Regulatory Specialist Date: 8/16/2012 Email: arawson@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Name
400316633	FORM 5A SUBMITTED
400316638	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Operator contacted to: Confirm reported formation tops. Correct perf intervals on 5A if formation tops are accurate. Provide date of first production on NBRR-CDLL. Provide fluid totals if possible. Correct prod. reporting.	5/20/2015 9:05:07 AM
Permit	Sent back to draft so operator could correct intervals to match the formations.	11/21/2012 3:20:33 PM
Permit	On hold. Formation tops do not match intervals.	10/17/2012 3:55:37 PM

Total: 3 comment(s)