

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:

400775718

Date Received:

01/20/2015

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 05-123-38847-00 County: WELD  
Well Name: Rainbow Well Number: LC28-74HNA  
Location: QtrQtr: SWSE Section: 28 Township: 9N Range: 59W Meridian: 6  
Footage at surface: Distance: 340 feet Direction: FSL Distance: 1885 feet Direction: FEL  
As Drilled Latitude: 40.715053 As Drilled Longitude: -103.980021

GPS Data:  
Date of Measurement: 09/05/2014 PDOP Reading: 2.6 GPS Instrument Operator's Name: Toa Sagapolutele

\*\* If directional footage at Top of Prod. Zone Dist.: 867 feet Direction: FSL Dist.: 2087 feet Direction: FEL  
Sec: 28 Twp: 9N Rng: 59W

\*\* If directional footage at Bottom Hole Dist.: 675 feet Direction: FNL Dist.: 1980 feet Direction: FEL  
Sec: 28 Twp: 9N Rng: 59W

Field Name: DJ HORIZONTAL NIOBRARA Field Number: 16950  
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/22/2014 Date TD: 07/26/2014 Date Casing Set or D&A: 07/27/2014  
Rig Release Date: 07/28/2014 Per Rule 308A.b.

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

Total Depth MD 10287 TVD\*\* 6019 Plug Back Total Depth MD 10218 TVD\*\* 6019  
Elevations GR 4843 KB 4867 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	80	0	124	VISU
SURF	13+3/4	9+5/8	36	0	612	380	0	612	VISU
1ST	8+3/4	7	26	0	6,358	471	850	6,358	CBL
1ST LINER	6+1/8	4+1/2	11.60	6138	10,263	310	6,138	10,263	

**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	2,475				
SUSSEX	4,063				
NIOBRARA	6,161				

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 Analyst I Date: 1/20/2015 Email: eroberts@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400775796	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400775798	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"/>
<b>Other Attachments</b>			
400775718	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400775782	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400775785	MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400775786	MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400775788	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400775791	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400775792	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400852754	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

User Group	Comment	Comment Date
Engineering Tech	Was the liner cemented on this well? if so, we need cement top and bottom on the liner. The Directional Data and Directional Survey have Total depth of 10287, but Form 5 has 10271. The gamma ray log has different setting depth for the 7" casing than reported in the Form 5. (reported info doesn't match logs & attachments) Eileen Roberts responded 7/13/15 @ 3:48pm: stated TOC on liner 6138', bottom 10263', Well TD 10287'. setting depth of 7" casing 6358'.	7/13/2015 3:21:35 PM
Permit	Added new directional data provided by the operator.	6/12/2015 8:03:52 AM
Permit	Requested new directionals or new survey. Gave a deadline 05/15/2015	5/7/2015 11:44:45 AM
Permit	New directionals are still inaccurate. Requested 2nd time.	4/17/2015 10:47:44 AM
Permit	Added new directionals from the operator.	4/2/2015 10:42:26 AM
Permit	requested corrected directionals from the operator.	3/16/2015 2:13:50 PM

Total: 6 comment(s)