

**FORM
5**Rev
10/14**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:

400899999

Date Received:

09/15/2015

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/or 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) 228-4330
Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
City: DENVER State: CO Zip: 80202 Email: eileen.roberts@nblenergy.com

API Number 05-123-40597-00 County: WELD
Well Name: Haley Well Number: LC27-715
Location: QtrQtr: NENE Section: 34 Township: 9N Range: 59W Meridian: 6
Footage at surface: Distance: 660 feet Direction: FNL Distance: 785 feet Direction: FEL
As Drilled Latitude: 40.712482 As Drilled Longitude: -103.957080

GPS Data:

Date of Measurement: 03/05/2015 PDOP Reading: 1.9 GPS Instrument Operator's Name: Toa Sagapolutele

** If directional footage at Top of Prod. Zone Dist: 121 feet Direction: FSL Dist: 356 feet Direction: FEL
Sec: 27 Twp: 9N Rng: 59W

** If directional footage at Bottom Hole Dist: 330 feet Direction: FNL Dist: 330 feet Direction: FEL
Sec: 27 Twp: 9N Rng: 59W

Field Name: WILDCAT Field Number: 99999

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 05/06/2015 Date TD: 05/11/2015 Date Casing Set or D&A: 05/12/2015
Rig Release Date: 05/12/2015 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ ObservationTotal Depth MD 11352 TVD** 5932 Plug Back Total Depth MD 11340 TVD** 5932Elevations GR 4814 KB 4838 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL/Gamma, open-hole resistivity. No mud logs run.

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	24	104	80	0	104	VISU
SURF	13+1/2	9+5/8	36	24	632	281	0	632	VISU
1ST	8+3/4	7	26	24	6,332	517	892	6,332	CBL
1ST LINER	6+1/8	4+1/2	11.6	6208	11,342				

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	404				
PARKMAN	3,346				
SUSSEX	4,086				
SHANNON	4,462				
NIOBRARA	6,016				

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

Date: 9/15/2015

Email: eileen.roberts@nblenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
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Attachment Checklist

400900087	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
901313	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"/>

Other Attachments

901318	RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
901319	RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400900082	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400900083	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400900084	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400900086	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400900090	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	Per operator, attached open hole resistivity .pdf and .las log files.	9/24/2015 9:07:55 AM
Permit	Per operator, attached a revised directional survey that shows the corrected BHL T-9N.	9/23/2015 8:36:38 AM

Total: 2 comment(s)