

FORM
5Rev
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



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Document Number:

400935246

Date Received:

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 100322

Contact Name: Julie Webb

Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2223

Address: 1625 BROADWAY STE 2200

Fax:

City: DENVER

State: CO

Zip: 80202

API Number 05-123-41529-00

County: WELD

Well Name: 70 Ranch State

Well Number: BB18-681

Location: QtrQtr: NENE Section: 17 Township: 5N Range: 63W Meridian: 6

Footage at surface: Distance: 293 feet Direction: FNL Distance: 600 feet Direction: FEL

As Drilled Latitude: 40.405140 As Drilled Longitude: -104.453610

GPS Data:

Date of Measurement: 07/07/2015 PDOP Reading: 2.3 GPS Instrument Operator's Name: Toa Sagapolutele

** If directional footage at Top of Prod. Zone Dist.: 274 feet. Direction: FNL Dist.: 974 feet. Direction: FEL

Sec: 17 Twp: 5N Rng: 63W

** If directional footage at Bottom Hole Dist.: 380 feet. Direction: FNL Dist.: 535 feet. Direction: FWL

Sec: 18 Twp: 5N Rng: 63W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/23/2015 Date TD: 08/01/2015 Date Casing Set or D&A: 07/27/2015

Rig Release Date: 08/03/2015 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 16023 TVD** 6796 Plug Back Total Depth MD 15289 TVD** 6789

Elevations GR 4699 KB 4723 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL,GR, Mud- No Open hole resistivity log

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		0	104	80	0	104	VISU
SURF	13+3/4	9+5/8		0	770	330	0	770	VISU
1ST	8+3/4	7		0	7,057	586		7,057	CBL
1ST LINER	6+1/8	4+1/2		6183	16,023				

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	
PARKMAN	3,585				
SUSSEX	4,344				
SHANNON	4,825				
NIOBRARA	6,515				

Comment:

GPS was surveyed after conductor was set.
Rig Release date for the well

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

Signed: _____

Print Name: Julie Webb

Title: Regulatory Analyst Date: _____ Email: jwebb@progressivepcs.net

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400935283	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400935288	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>			
400935285	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400935289	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400935291	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400935294	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400935295	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400935296	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400935301	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)