

**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



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Document Number:  
400793305

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: Kathleen Mills  
 Name of Operator: NOBLE ENERGY INC Phone: (720) 587-2226  
 Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286  
 City: DENVER State: CO Zip: 80202

API Number 05-123-37621-00 County: WELD  
 Well Name: ROHN STATE Well Number: LD10-65-1HN  
 Location: QtrQtr: NESE Section: 9 Township: 9N Range: 58W Meridian: 6  
 Footage at surface: Distance: 2125 feet Direction: FSL Distance: 330 feet Direction: FEL  
 As Drilled Latitude: 40.764410 As Drilled Longitude: -103.861108

GPS Data:  
 Date of Measurement: 08/25/2014 PDOP Reading: 2.1 GPS Instrument Operator's Name: TOA SAGAPOLUTELE

\*\* If directional footage at Top of Prod. Zone Dist.: 2333 feet. Direction: FSL Dist.: 599 feet. Direction: FWL  
 Sec: 10 Twp: 9N Rng: 58W  
 \*\* If directional footage at Bottom Hole Dist.: 2310 feet. Direction: FSL Dist.: 663 feet. Direction: FEL  
 Sec: 10 Twp: 9N Rng: 58W

Field Name: WILDCAT Field Number: 99999  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 10/26/2014 Date TD: 11/01/2014 Date Casing Set or D&A: 11/02/2014  
 Rig Release Date: 11/13/2014 Per Rule 308A.b.

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

Total Depth MD 10243 TVD\*\* 5720 Plug Back Total Depth MD 10243 TVD\*\* 5720

Elevations GR 4716 KB 1732 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
USIT, MUD, MWD

**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	24	16	42	0	116	48	0	116	VISU
SURF	13+1/2	9+5/8	36	0	1,235	510	0	1,235	VISU
1ST	8+3/4	7	26	0	6,138	467	800	6,138	CBL
1ST LINER	6+1/8	4+1/2	11.6	5976	10,228				

### 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	2,205				
PARKMAN	3,271				
SUSSEX	3,916				
SHANNON	4,336				
TEEPEE BUTTES	5,027				
NIOBRARA	5,703				

Comment:

GPS TAKEN ON CONDUCTOR

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

Signed: \_\_\_\_\_

Print Name: Kathleen Mills

Title: Regulatory Analyst

Date: \_\_\_\_\_

Email: kmills@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400793713	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400793741	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>			
400793354	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400793680	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400793685	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400793689	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400793694	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400793743	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400997044	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400997048	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400997049	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)