

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



DE	ET	OE	ES
----	----	----	----

Document Number:
401000416

Date Received:

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 4. Contact Name: Julie Webb
 2. Name of Operator: NOBLE ENERGY INC Phone: (720) 587-2223
 3. Address: 1625 BROADWAY STE 2200 Fax: _____
 City: DENVER State: CO Zip: 80202 Email: jwebb@progressivepcs.net

5. API Number 05-123-40160-00 6. County: WELD
 7. Well Name: Crow Creek Well Number: AA01-785
 8. Location: QtrQtr: NWNW Section: 1 Township: 6N Range: 63W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/13/2016 End Date: 01/22/2016 Date of First Production this formation: 02/13/2016
 Perforations Top: 7404 Bottom: 11471 No. Holes: 0 Hole size: _____

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

Niobrara frac'd with 3279147 lb Ottawa Sand, 5784716 gal Fresh water, 5936191 gal silverstem and slickwater

This formation is commingled with another formation: Yes No
 Total fluid used in treatment (bbl): 279068 Max pressure during treatment (psi): 7399
 Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43
 Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.99
 Total acid used in treatment (bbl): _____ Number of staged intervals: 20
 Recycled water used in treatment (bbl): 141337 Flowback volume recovered (bbl): 6374
 Fresh water used in treatment (bbl): 137731 Disposition method for flowback: RECYCLE
 Total proppant used (lbs): 3279147 Rule 805 green completion techniques were utilized:
 Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 02/22/2016 Hours: 24 Bbl oil: 312 Mcf Gas: 167 Bbl H2O: 529
 Calculated 24 hour rate: Bbl oil: 312 Mcf Gas: 167 Bbl H2O: 529 GOR: 535
 Test Method: Flowing Casing PSI: 9 Tubing PSI: 838 Choke Size: 20/64
 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1377 API Gravity Oil: 52
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 6846 Tbg setting date: 02/11/2016 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:

Actual TPZ, 660'FNL, 352' FWL Sec. 1-T6N-R63W

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: Senior Regualtory Analyst Date: _____ Email: jwebb@progressivepcs.net
:

Attachment Check List

Att Doc Num **Name**

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

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

Total: 0 comment(s)