

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



Document Number:

400715503

Date Received:

02/29/2016

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: 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 05-123-38162-00

County: WELD

Well Name: Storis

Well Number: E24-78-1HN

Location: QtrQtr: SWSW Section: 24 Township: 6N Range: 65W Meridian: 6

Footage at surface: Distance: 350 feet Direction: FSL Distance: 927 feet Direction: FWL

As Drilled Latitude: 40.465180 As Drilled Longitude: -104.617515

GPS Data:

Date of Measurement: 09/24/2014 PDOP Reading: 2.3 GPS Instrument Operator's Name: TOA SAGAPOLUTELE

** If directional footage at Top of Prod. Zone Dist.: 643 feet Direction: FSL Dist.: 1007 feet Direction: FWL

Sec: 24 Twp: 6N Rng: 65W

** If directional footage at Bottom Hole Dist.: 375 feet Direction: FNL Dist.: 1019 feet Direction: FWL

Sec: 24 Twp: 6N Rng: 65W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/05/2014 Date TD: 05/14/2014 Date Casing Set or D&A: 05/15/2014

Rig Release Date: 07/14/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 11516 TVD** 6866 Plug Back Total Depth MD 11516 TVD** 6866

Elevations GR 4692 KB 4722 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

USIT, MUD, GR/RES

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	17+1/2	16	42.05	0	130	88	0	130	VISU
SURF	13+3/4	9+5/8	36	0	759	434	0	759	VISU
1ST	8+3/4	7	26	0	7,102	660	575	7,102	CBL
1ST LINER	6+1/8	4+1/2	11.60	7018	11,501	0			

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	1,020				
PARKMAN	3,616				
SUSSEX	4,169				
SHANNON	4,922				
TEEPEE BUTTES	6,051				
NIOBRARA	6,690				NBRR B 6546, NBRR C 6992

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: Kathleen Mills

Title: Regulatory Analyst Date: 2/29/2016 Email: kmills@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400715589	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400715591	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>					
400715503	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400715542	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400715551	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400715552	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400715586	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400715587	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400715588	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400715605	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400997219	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Operator uploaded CBL.	2/29/2016 2:45:31 PM
Permit	CBL corrupted. Contacted operator. Returned to draft.	2/26/2016 11:08:34 AM

Total: 2 comment(s)