

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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
2. Name of Operator: NOBLE ENERGY INC
3. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202
4. Contact Name: Cheryl Johnson
Phone: (303) 228-4437
Fax: (303) 228-4286
Email: eroberts@nobleenergyinc.com

5. API Number 05-123-39482-00
6. County: WELD
7. Well Name: FIVE RIVERS
Well Number: K09-66-1HN
8. Location: QtrQtr: SWNW Section: 9 Township: 4N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/04/2014 End Date: 10/05/2014 Date of First Production this formation: 11/08/2014

Perforations Top: 7430 Bottom: 11923 No. Holes: Hole size:

Provide a brief summary of the formation treatment: Open Hole: [X]

Frac'd the Niobrara w/3302780 gals of Silverstim and Slick Water with 4483481#s of Ottawa sand.

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 78637 Max pressure during treatment (psi): 7191

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): 0.98

Total acid used in treatment (bbl): 0 Number of staged intervals: 19

Recycled water used in treatment (bbl): 4842 Flowback volume recovered (bbl): 360

Fresh water used in treatment (bbl): 73795 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 4483481 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/26/2014 Hours: 24 Bbl oil: 177 Mcf Gas: 1567 Bbl H2O: 247

Calculated 24 hour rate: Bbl oil: 177 Mcf Gas: 1567 Bbl H2O: 247 GOR: 8853

Test Method: flowing Casing PSI: 296 Tubing PSI: 253 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1283 API Gravity Oil: 58

Tubing Size: 2 + 7/8 Tubing Setting Depth: 7129 Tbg setting date: 11/14/2014 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:

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

Signed: _____ Print Name: Cheryl Johnson

Title: Regulatory Advisor Date: 1/23/2015 Email: eroberts@nobleenergyinc.com
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Attachment Check List

Att Doc Num **Name**

400777579	FORM 5A SUBMITTED
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Total Attach: 1 Files

General Comments

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

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