

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: Eileen Roberts
Phone: (303) 2284330
Fax: (303) 2284286
Email: eroberts@nobleenergyinc.com

5. API Number 05-123-39559-00
6. County: WELD
7. Well Name: SHABLE
Well Number: K08-68-1HN
8. Location: QtrQtr: NENE Section: 7 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: 10/09/2014 End Date: 10/24/2014 Date of First Production this formation: 11/17/2014

Perforations Top: 7651 Bottom: 17321 No. Holes: Hole size:

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

Frac'd the Niobrara w/ 14952525 gals of Silverstim and Slick Water with 8087732#'s of Ottawa sand.

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

Total fluid used in treatment (bbl): 356012 Max pressure during treatment (psi): 6550

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): 0.92

Total acid used in treatment (bbl): 0 Number of staged intervals: 38

Recycled water used in treatment (bbl): 206689 Flowback volume recovered (bbl): 232

Fresh water used in treatment (bbl): 149323 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 8087732 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: 11/30/2014 Hours: 24 Bbl oil: 120 Mcf Gas: 951 Bbl H2O: 340

Calculated 24 hour rate: Bbl oil: 120 Mcf Gas: 951 Bbl H2O: 340 GOR: 7925

Test Method: FLOWING Casing PSI: 2988 Tubing PSI: 2388 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1325 API Gravity Oil: 42

Tubing Size: 2 + 7/8 Tubing Setting Depth: 7349 Tbg setting date: 11/19/2014 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: Eileen Roberts

Title: Regulatory Analyst I Date: 1/21/2015 Email: eroberts@nobleenergyinc.com
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Attachment Check List

Att Doc Num **Name**

400777390	FORM 5A SUBMITTED
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Total Attach: 1 Files

General Comments

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

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Total: 0 comment(s)