

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



Document Number:

400777378

Date Received:

01/23/2015

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 05-123-39551-00 County: WELD
Well Name: Heartland Well Number: G25-73-1HN
Location: QtrQtr: SESE Section: 25 Township: 4N Range: 65W Meridian: 6
Footage at surface: Distance: 282 feet Direction: FSL Distance: 739 feet Direction: FEL
As Drilled Latitude: 40.276751 As Drilled Longitude: -104.605015

GPS Data:
Date of Measurement: 10/21/2014 PDOP Reading: 1.4 GPS Instrument Operator's Name: TAO SAGAPOLUTELE

** If directional footage at Top of Prod. Zone Dist.: 1205 feet Direction: FSL Dist.: 963 feet Direction: FEL
Sec: 25 Twp: 4N Rng: 65W
** If directional footage at Bottom Hole Dist.: 89 feet Direction: FNL Dist.: 1121 feet Direction: FEL
Sec: 24 Twp: 4N Rng: 65W

Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 09/22/2014 Date TD: 10/01/2014 Date Casing Set or D&A: 10/02/2014
Rig Release Date: 10/04/2014 Per Rule 308A.b.

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

Total Depth MD 16867 TVD** 6998 Plug Back Total Depth MD 16857 TVD** 6998
Elevations GR 4835 KB 4851 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
CBL, MUD, GR/RESISTIVITY

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	42.00	0	96	48	0	96	VISU
SURF	13+1/2	9+5/8	36	0	711	351	0	711	VISU
1ST	8+3/4	7	26	0	7,372	640	520	7,372	CBL
1ST LINER	6+1/8	4+1/2	11.6	7243	16,857				

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	1,078				
PARKMAN	3,799				
SUSSEX	4,163				
SHANNON	5,009				
TEEPEE BUTTES	6,047				
NIOBRARA	6,877				

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: 1/23/2015 Email: eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400777464	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400777466	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>			
901540	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777378	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777401	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777403	MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777406	MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777408	MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777413	MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777455	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777459	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400777463	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400778913	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Operator submitted complete GR .pdf and .las files.	11/22/2016
Permit	GR .pdf and .las is incomplete.	10/18/2016

Total: 2 comment(s)