

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:

400832781

Date Received:

04/29/2015

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: EILEEN ROBERTS
Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330
Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286
City: DENVER State: CO Zip: 80202

API Number 05-123-37940-00 County: WELD
Well Name: Oscar Y Well Number: 10-72-1HN
Location: QtrQtr: NESE Section: 10 Township: 2N Range: 64W Meridian: 6
Footage at surface: Distance: 2380 feet Direction: FSL Distance: 748 feet Direction: FEL
As Drilled Latitude: 40.152220 As Drilled Longitude: -104.530780

GPS Data:
Date of Measurement: 08/01/2014 PDOP Reading: 2.4 GPS Instrument Operator's Name: Riley Jonsson

** If directional footage at Top of Prod. Zone Dist.: 1965 feet Direction: FNL Dist.: 288 feet Direction: FEL
Sec: 10 Twp: 2N Rng: 64W
** If directional footage at Bottom Hole Dist.: 76 feet Direction: FNL Dist.: 370 feet Direction: FEL
Sec: 3 Twp: 2N Rng: 64W

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

Spud Date: (when the 1st bit hit the dirt) 12/05/2014 Date TD: 12/13/2014 Date Casing Set or D&A: 12/15/2014
Rig Release Date: 12/15/2014 Per Rule 308A.b.

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

Total Depth MD 14333 TVD** 6834 Plug Back Total Depth MD 14316 TVD** 6834
Elevations GR 4929 KB 4953 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
CBL/Mud/Gamma.

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	26	16	42.5	0	104	80	0	104	VISU
SURF	13+1/2	9+5/8	36	0	1,153	420	0	1,153	VISU
1ST	8+3/4	7	26	0	7,238	745	1,240	7,238	CBL
1ST LINER	6+1/8	4+1/2	11.6	7164	14,318				

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	1,349				
PARKMAN	3,918				
SUSSEX	4,251				
SHANNON	5,067				
NIOBRARA	7,123				

Operator Comments

A Rule 317.p. Exception was granted for the subject well and no open hole logs were run.

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: 4/29/2015

Email: eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400832886	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400832887	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>			
400832781	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400832872	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400832875	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400832876	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400832879	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400832880	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400832882	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400832891	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	Corrected TD TVD and PBTVD to reflect directional survey.	11/21/2016

Total: 1 comment(s)