

FORM 5A

Rev 06/12

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number: 401167697

Date Received:

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 4. Contact Name: Julie Webb
 2. Name of Operator: NOBLE ENERGY INC Phone: (720) 587-2223
 3. Address: 1625 BROADWAY STE 2200 Fax: _____
 City: DENVER State: CO Zip: 80202 Email: jwebb@progressivepcs.net

5. API Number 05-123-22319-00 6. County: WELD
 7. Well Name: AUFRECT N Well Number: 2-2
 8. Location: QtrQtr: NWNE Section: 2 Township: 5N Range: 67W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/16/2007 End Date: 05/16/2007 Date of First Production this formation: 05/21/2007

Perforations Top: 7158 Bottom: 7186 No. Holes: 112 Hole size: 0.42

Provide a brief summary of the formation treatment: Open Hole:

Codell frac'd with 128371 gal silverstem 32# gel, 270320 lbs Ottawa Sand, and 12,000 # Ac-Frac SB Excel

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 3056 Max pressure during treatment (psi): 7491
 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): _____
 Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____
 Total acid used in treatment (bbl): 0 Number of staged intervals: _____
 Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): _____
 Fresh water used in treatment (bbl): 3056 Disposition method for flowback: _____
 Total proppant used (lbs): 282320 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____
 Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____
 Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____
 Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7141 Tbg setting date: 07/30/2012 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.

FORMATION: J SAND Status: TEMPORARILY ABANDONED Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/06/2006 End Date: 11/06/2006 Date of First Production this formation: 11/17/2006

Perforations Top: 7638 Bottom: 7678 No. Holes: 124 Hole size: 0.42

Provide a brief summary of the formation treatment: Open Hole:

J sand frac'd with 9870 gal Linear gel, 128,394 gal Silverstem 24#gel, 435,840 20/40 Ottawa Sand, 12000 AC-Frac SB Excel

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 3292 Max pressure during treatment (psi): 4148

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal):

Type of gas used in treatment: Min frac gradient (psi/ft):

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

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl):

Fresh water used in treatment (bbl): 3292 Disposition method for flowback:

Total proppant used (lbs): 447840 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/28/2016 Hours: 24 Bbl oil: 5 Mcf Gas: 255 Bbl H2O: 55

Calculated 24 hour rate: Bbl oil: 5 Mcf Gas: 255 Bbl H2O: 55 GOR: 51000

Test Method: Flowing Casing PSI: 640 Tubing PSI: 340 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1233 API Gravity Oil: 49

Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production: CIBP set at 7488

Date formation Abandoned: 07/24/2012 Squeeze: Yes No If yes, number of sacks cmt

** Bridge Plug Depth: 7488 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

Comment:

The original form 5A is attached as other. The original form 5A was submitted via hard copy as is was completed prior to eforms. Wireline summary was not available, operations summary is attached.

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

Signed: Print Name: Julie Webb

Title: Senior Regulatory Analyst Date: Email jwebb@progressivepcs.net

Attachment Check List

Table with 2 columns: Att Doc Num, Name. Rows: 401169633 OTHER, 401169737 OPERATIONS SUMMARY

Total Attach: 2 Files

General Comments

Table with 3 columns: User Group, Comment, Comment Date. Row: Stamp Upon Approval

Total: 0 comment(s)