

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) 228-4330
Fax: (303) 228-4286
Email: eileen.roberts@nblenergy.com

5. API Number 05-123-40689-00
6. County: WELD
7. Well Name: Gleason
Well Number: LC26-720
8. Location: QtrQtr: SESE Section: 26 Township: 9N Range: 59W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 08/27/2015 End Date: 08/31/2015 Date of First Production this formation: 09/20/2015

Perforations Top: 6389 Bottom: 10043 No. Holes: 0 Hole size:

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

Frac'd the Niobrara w/ 3480487 gals of Silverstim and Slick Water 15% HCL with 1260220#'s of Ottawa sand.

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

Total fluid used in treatment (bbl): 82868 Max pressure during treatment (psi): 5188

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: Min frac gradient (psi/ft): 0.86

Total acid used in treatment (bbl): 24 Number of staged intervals: 11

Recycled water used in treatment (bbl): 3538 Flowback volume recovered (bbl): 126

Fresh water used in treatment (bbl): 79330 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 1260220 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: 09/20/2015 Hours: 24 Bbl oil: 410 Mcf Gas: 216 Bbl H2O: 336

Calculated 24 hour rate: Bbl oil: 410 Mcf Gas: 216 Bbl H2O: 336 GOR: 526

Test Method: FLOWING Casing PSI: 917 Tubing PSI: 365 Choke Size: 26/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1264 API Gravity Oil: 38

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6180 Tbg setting date: 09/17/2015 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 Date: 10/7/2015 Email eileen.roberts@nblenergy.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400912752	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)