

### COMPLETED INTERVAL REPORT

Document Number:  
401265900

Date Received:

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: <u>100322</u>	4. Contact Name: <u>Julie Webb</u>
2. Name of Operator: <u>NOBLE ENERGY INC</u>	Phone: <u>(720) 587-2223</u>
3. Address: <u>1625 BROADWAY STE 2200</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>jwebb@progressivepcs.net</u>

5. API Number <u>05-123-43289-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>Anni</u>	Well Number: <u>LD29-755</u>
8. Location: QtrQtr: <u>SESW</u> Section: <u>20</u> Township: <u>9N</u> Range: <u>58W</u> Meridian: <u>6</u>	
9. Field Name: <u>WILDCAT</u>	Field Code: <u>99999</u>

### Completed Interval

FORMATION: <u>NIOBRARA</u>	Status: <u>PRODUCING</u>	Treatment Type: <u>FRACTURE STIMULATION</u>
Treatment Date: <u>12/30/2016</u>	End Date: <u>01/10/2017</u>	Date of First Production this formation: <u>04/07/2017</u>
Perforations Top: <u>6526</u>	Bottom: <u>11001</u>	No. Holes: <u>828</u> Hole size: <u>0.48</u>
Provide a brief summary of the formation treatment: <u>Open Hole: <input type="checkbox"/></u>		
Niobrara Frac'd with 1,431,665 lbs 100 Mesh, 6,371,513 lbs 40/70 Ottawa Sand, 9,529,317 gal silverstem and slickwater, 342 bbl 15% HCL		

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): <u>226889</u>	Max pressure during treatment (psi): <u>7063</u>
Total gas used in treatment (mcf): _____	Fluid density at initial fracture (lbs/gal): <u>8.43</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.81</u>
Total acid used in treatment (bbl): <u>342</u>	Number of staged intervals: <u>29</u>
Recycled water used in treatment (bbl): <u>6833</u>	Flowback volume recovered (bbl): <u>5143</u>
Fresh water used in treatment (bbl): <u>220056</u>	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>7803178</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

**Test Information:**

Date: <u>04/11/2017</u>	Hours: <u>24</u>	Bbl oil: <u>902</u>	Mcf Gas: <u>400</u>	Bbl H2O: <u>306</u>
Calculated 24 hour rate:	Bbl oil: <u>902</u>	Mcf Gas: <u>400</u>	Bbl H2O: <u>306</u>	GOR: <u>443</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>13</u>	Tubing PSI: <u>667</u>	Choke Size: <u>20/64</u>	
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	Btu Gas: <u>1398</u>	API Gravity Oil: <u>52</u>	
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>6221</u>	Tbg setting date: <u>02/25/2017</u>	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:

Actual TPZ is 340' FNL, 2317' FWL, Sec 29, 9N, 58W

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 Regualtory Analyst Date: \_\_\_\_\_ Email: jwebb@progressivepcs.net  
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### Attachment Check List

**Att Doc Num**      **Name**

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Total Attach: 0 Files

### General Comments

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

		Stamp Upon Approval
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Total: 0 comment(s)