

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: Julie Webb
Phone: (720) 587-2223
Fax:
Email: jwebb@progressivepcs.net

5. API Number 05-123-43481-00
6. County: WELD
7. Well Name: Riley
Well Number: LD19-738
8. Location: QtrQtr: SWSE Section: 19 Township: 9N Range: 58W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/11/2017 End Date: 01/22/2017 Date of First Production this formation: 04/15/2017

Perforations Top: 6082 Bottom: 10803 No. Holes: 1014 Hole size: 0.5

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

Niobrara Frac'd with 1,022,858 lbs 100 Mesh, 7,950,741 lbs 40/70 Sand, 10,346,938 gal Silverstem and slickwater, 197 bbls 28% HCL

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

Total fluid used in treatment (bbl): 246356 Max pressure during treatment (psi): 7950

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

Type of gas used in treatment: Min frac gradient (psi/ft): 0.79

Total acid used in treatment (bbl): 197 Number of staged intervals: 35

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 3165

Fresh water used in treatment (bbl): 246356 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 8973599 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: 04/21/2017 Hours: 24 Bbl oil: 814 Mcf Gas: 340 Bbl H2O: 513

Calculated 24 hour rate: Bbl oil: 814 Mcf Gas: 340 Bbl H2O: 513 GOR: 417

Test Method: Flowing Casing PSI: 20 Tubing PSI: 860 Choke Size: 20

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1284 API Gravity Oil: 52

Tubing Size: 2 + 3/8 Tubing Setting Depth: 5976 Tbg setting date: 02/26/2017 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 was reported correctly on the form 5.

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: 5/9/2017 Email: jwebb@progressivepcs.net
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401277975	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)