

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:

401318237

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

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 05-123-18602-00

7. Well Name: GOETZEL

8. Location: QtrQtr: NWSE Section: 29 Township: 6N Range: 66W Meridian: 6

9. Field Name: BRACEWELL Field Code: 7487

6. County: WELD

Well Number: 29-10G6

Completed Interval

FORMATION: CODELL	Status: ABANDONED WELLBORE/COMPLETION	Treatment Type:
Treatment Date:	End Date:	Date of First Production this formation: 03/05/1995
Perforations Top: 7060	Bottom: 7080	No. Holes: 160 Hole size:
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>
This formation is commingled with another formation:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Total fluid used in treatment (bbl):	Max pressure during treatment (psi):	
Total gas used in treatment (mcf):	Fluid density at initial fracture (lbs/gal):	
Type of gas used in treatment:	Min frac gradient (psi/ft):	
Total acid used in treatment (bbl):	Number of staged intervals:	
Recycled water used in treatment (bbl):	Flowback volume recovered (bbl):	
Fresh water used in treatment (bbl):	Disposition method for flowback:	
Total proppant used (lbs):	Rule 805 green completion techniques were utilized: <input type="checkbox"/>	
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:	Tubing Setting Depth:	Tbg setting date:	Packer Depth:	
Reason for Non-Production:	The well is closed to the atmosphere via a CIBP set at 7010' on 4/26/2017 for an off-set frac. Noble will return the well to production or Plug and abandon the well once the off-set frac is complete and a rig is available. Noble will run an MIT if the well is still AB after two years.			
Date formation Abandoned:	04/26/2017	Squeeze:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt
** Bridge Plug Depth:	7010	** Sacks cement on top:	2	** Wireline and Cement Job Summary must be attached.

Comment:

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
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Attachment Check List

Att Doc Num	Name
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401318274	OPERATIONS SUMMARY
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Total Attach: 1 Files

General Comments

User Group	Comment
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Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)