

FORM
5ARev
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:

401843977

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: Holly Hill
 2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4232
 3. Address: 1001 NOBLE ENERGY WAY Fax: _____
 City: HOUSTON State: TX Zip: 77070 Email: Denverregulatory@nblenergy.com

5. API Number 05-123-44608-00 6. County: WELD
 7. Well Name: Centennial State Well Number: G34-679
 8. Location: QtrQtr: NENE Section: 35 Township: 4N Range: 65W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATIONTreatment Date: 04/28/2018 End Date: 05/17/2018 Date of First Production this formation: 07/15/2018Perforations Top: 6809 Bottom: 16824 No. Holes: 984 Hole size: 0.48

Provide a brief summary of the formation treatment:

Open Hole: ☐

Niobrara completed with 383,818 bbls slurry, 1,653 bbls 15% HCl, 913,508 lbs 100 mesh, 3,842,388 lbs 30/50 sand, 4,230,534 lbs 40/70 sand

This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 385471Max pressure during treatment (psi): 8916

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): 0.94Total acid used in treatment (bbl): 1653Number of staged intervals: 42

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): 0Fresh water used in treatment (bbl): 383818Disposition method for flowback: DISPOSALTotal proppant used (lbs): 8986430Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 07/29/2018 Hours: 24 Bbl oil: 263 Mcf Gas: 1823 Bbl H2O: 0Calculated 24 hour rate: Bbl oil: 263 Mcf Gas: 1823 Bbl H2O: 0 GOR: 6931Test Method: Flowing Casing PSI: 2570 Tubing PSI: 2407 Choke Size: 14/64Gas Disposition: SOLD Gas Type: WET Btu Gas: 1244 API Gravity Oil: 60Tubing Size: 2 + 3/8 Tubing Setting Depth: 6761 Tbg setting date: 07/10/2018 Packer Depth: 6761

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 754' FNL 3' FEL

No water recovered during flowback

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: Sr. Regulatory Analyst Date: _____ Email Julie.webb@nbleenergy.com
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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)