

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:

401278211

Date Received:

05/11/2017

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: 1001 NOBLE ENERGY WAY  
City: HOUSTON State: TX Zip: 77070

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

5. API Number 05-123-43480-00

6. County: WELD

7. Well Name: Riley

Well Number: LD19-752

8. Location: QtrQtr: SWSE Section: 19 Township: 9N Range: 58W Meridian: 6

9. Field Name: DJ HORIZONTAL NBRR-FTHYS- Field Code: 16953

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/11/2017 End Date: 01/22/2017 Date of First Production this formation: 04/16/2017

Perforations Top: 6197 Bottom: 10918 No. Holes: 264 Hole size: 0.5

Provide a brief summary of the formation treatment:

Open Hole: ☐

Codell Intervals: 6197-6550, 6853-7081, 9329-9444, 10504-10884

This formation is commingled with another formation: ☒ Yes ☐ 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: ☐

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:

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.

FORMATION: FORT HAYS Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/11/2017 End Date: 01/22/2017 Date of First Production this formation: 04/16/2017

Perforations Top: 6557 Bottom: 11040 No. Holes: 586 Hole size: 0.5

Provide a brief summary of the formation treatment: Open Hole: ☐

Ft. Hays Intervals: 6557-6828, 7104-8193, 9051-9326, 9456-10468, 11026-11040

This formation is commingled with another formation: ☒ Yes ☐ 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: ☐

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:

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.

FORMATION: NIOBRARA-FT HAYS-CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/11/2017 End Date: 01/22/2017 Date of First Production this formation: 04/16/2017

Perforations Top: 6197 Bottom: 10918 No. Holes: 1030 Hole size: 0.5

Provide a brief summary of the formation treatment: Open Hole: ☐

1,040,370 lbs 100 Mesh, 7,991,616 lbs 40/70 Sand, 10,556,599 gal silverstem and slickwater, 199 bbl 28% HCL

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 251546

Max pressure during treatment (psi): 8018

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): 0.77

Total acid used in treatment (bbl): 199

Number of staged intervals: 35

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 2825

Fresh water used in treatment (bbl): 251347

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 9031983

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

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

**Test Information:**

Date: 04/16/2017 Hours: 24 Bbl oil: 1350 Mcf Gas: 250 Bbl H2O: 1006

Calculated 24 hour rate: Bbl oil: 1350 Mcf Gas: 250 Bbl H2O: 1006 GOR: 185

Test Method: Flowing Casing PSI: 15 Tubing PSI: 992 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1287 API Gravity Oil: 52

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6098 Tbg setting date: 03/03/2017 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.

FORMATION: NIOBRARA		Status: PRODUCING		Treatment Type: FRACTURE STIMULATION	
Treatment Date: 01/11/2017		End Date: 01/22/2017		Date of First Production this formation: 04/16/2017	
Perforations Top: 8202		Bottom: 9047		No. Holes: 180      Hole size: 0.5	
Provide a brief summary of the formation treatment:				Open Hole: <input type="checkbox"/>	
Niobrara intervals: 8202-9047					
This formation is commingled with another formation:				<input checked="" type="checkbox"/> Yes <input 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:					
<b>Fracture stimulations must be reported on FracFocus.org</b>					
<b>Test Information:</b>					
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:					
Date formation Abandoned:	Squeeze:	<input type="checkbox"/> Yes <input type="checkbox"/> 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 348' FSL, 2604' FWL	
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: 5/11/2017      Email: jwebb@progressivepcs.net

### Attachment Check List

Att Doc Num	Name
401278211	FORM 5A SUBMITTED
Total Attach: 1 Files	

### General Comments

User Group	Comment	Comment Date
Permit	- Changed the total fluid used value to include total acid used in treatment - Changed the field name from wildcat to DJ Horizontal Niobrara-Fort Hays-Codell - Changed the treatment dates on the Niobrara panel to 1/11/17-1/22/17 as per documents	08/01/2018

Total: 1 comment(s)