

FORM  
5Rev  
09/14

## State of Colorado

## Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

401860243

Date Received:

## DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 100322

Contact Name: Holly Hill

Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4232

Address: 1001 NOBLE ENERGY WAY

Fax:

City: HOUSTON

State: TX

Zip: 77070

API Number 05-123-47611-00

County: WELD

Well Name: DOROTHY STATE

Well Number: LG16-785

Location: QtrQtr: NENW Section: 9 Township: 8N Range: 59W Meridian: 6

Footage at surface: Distance: 335 feet Direction: FNL Distance: 1320 feet Direction: FWL

As Drilled Latitude: 40.683209 As Drilled Longitude: -103.986071

## GPS Data:

Date of Measurement: 10/15/2018 PDOP Reading: 6.0 GPS Instrument Operator's Name: Toa Sagapolutele

\*\* If directional footage at Top of Prod. Zone Dist.: 393 feet. Direction: FNL Dist.: 320 feet. Direction: FWL

Sec: 9 Twp: 8N Rng: 59W

\*\* If directional footage at Bottom Hole Dist.: 145 feet. Direction: FSL Dist.: 323 feet. Direction: FWL

Sec: 16 Twp: 8N Rng: 59W

Field Name: DJ HORIZONTAL NIOBRARA

Field Number: 16950

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 10/23/2018 Date TD: 10/27/2018 Date Casing Set or D&amp;A: 10/29/2018

Rig Release Date: 11/21/2018 Per Rule 308A.b.

## Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 16775 TVD\*\* 5991 Plug Back Total Depth MD 16717 TVD\*\* 5991

Elevations GR 4854 KB 4884

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

CBL, MWD/LWD, Mud, Resistivity

## CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	36.94	0	110	64	0	110	CALC
SURF	13+1/2	9+5/8	36	0	1,943	674	0	1,943	VISU
1ST	8+1/2	5+1/2	20	0	16,760	1,688	2,300	16,760	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

## FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	3,375				
SUSSEX	4,112				
TEEPEE BUTTES	5,484				
SHARON SPRINGS	6,327				
NIOBRARA	6,435				

Comment:

As drilled GPS was surveyed after conductor was set.  
TPZ is estimated, actual will be submitted on the form 5A.

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@nblenergy.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401873034	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401860270	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
401860269	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401872901	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401872902	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401872910	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401872911	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401872917	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401873001	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401873009	LAS-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401873018	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401873026	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

