

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:

401562649

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: LOGAN BOUGHAL

Name of Operator: NOBLE ENERGY INC

Phone: (832) 6397447

Address: 1001 NOBLE ENERGY WAY

Fax:

City: HOUSTON

State: TX

Zip: 77070

API Number 05-123-45234-00

County: WELD

Well Name: Hullabaloo State

Well Number: Y21-726

Location: QtrQtr: NENE Section: 16 Township: 2N Range: 64W Meridian: 6

Footage at surface: Distance: 445 feet Direction: FNL Distance: 930 feet Direction: FEL

As Drilled Latitude: 40.144528 As Drilled Longitude: -104.550312

GPS Data:

Date of Measurement: 09/19/2017 PDOP Reading: 2.0 GPS Instrument Operator's Name: TOA SAGAPOLUTELE

** If directional footage at Top of Prod. Zone Dist.: 640 feet. Direction: FNL Dist.: 1056 feet. Direction: FEL

Sec: 16 Twp: 2N Rng: 64W

** If directional footage at Bottom Hole Dist.: 104 feet. Direction: FSL Dist.: 1052 feet. Direction: FEL

Sec: 21 Twp: 2N Rng: 64W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number: 70/7879-S

Spud Date: (when the 1st bit hit the dirt) 10/14/2017 Date TD: 10/18/2017 Date Casing Set or D&A: 10/19/2017

Rig Release Date: 10/19/2017 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17318 TVD** 6966 Plug Back Total Depth MD 17260 TVD** 6966

Elevations GR 4945 KB 4975

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

List Electric Logs Run:

CBL, MWD, (Resistivity in 05-123-45235)

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	40.09	0	110	64	0	110	VISU
SURF	13+1/2	9+5/8	36	0	2,022	686	0	2,022	VISU
1ST	8+1/2	5+1/2	20	0	17,308	1,907	1,954	17,308	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	
FOX HILLS	889				
PIERRE	1,009				
PARKMAN	3,937				
SUSSEX	4,283				
SHANNON	5,068				
TEEPEE BUTTES	6,155				
SHARON SPRINGS	6,873				
NIOBRARA	6,925				

Comment:

Actual TPZ is listed.
As drilled GPS was surveyed after conductor was set.
No Open Hole logs ran per rul 317.p. Resistivity log ran on HULLABALOO Y21-746 (123-45235)

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: LOGAN BOUGHAL

Title: REGULATORY ANALYST II

Date: _____

Email: LOGAN.BOUGHAL@NBLENERGY.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
401732345	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401566111	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>					
401566107	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401894562	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401894563	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401894567	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401894571	PDF-MWD/LWD	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)

