

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



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Document Number:

401529842

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: Craig Richardson

Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4232

Address: 1001 NOBLE ENERGY WAY

Fax:

City: HOUSTON

State: TX

Zip: 77070

API Number 05-123-44604-00

County: WELD

Well Name: Centennial State

Well Number: G34-675

Location: QtrQtr: SENE Section: 35 Township: 4N Range: 65W Meridian: 6

Footage at surface: Distance: 1550 feet Direction: FNL Distance: 285 feet Direction: FEL

As Drilled Latitude: 40.271731 As Drilled Longitude: -104.622086

GPS Data:

Date of Measurement: 01/10/2018 PDOP Reading: 2.1 GPS Instrument Operator's Name: TOA SAGAPOLUTELE

** If directional footage at Top of Prod. Zone Dist.: 1152 feet. Direction: FNL Dist.: 60 feet. Direction: FEL

Sec: 35 Twp: 4N Rng: 65W

** If directional footage at Bottom Hole Dist.: 1159 feet. Direction: FNL Dist.: 108 feet. Direction: FEL

Sec: 34 Twp: 4N Rng: 65W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/11/2018 Date TD: 02/14/2018 Date Casing Set or D&A: 02/15/2018

Rig Release Date: 02/15/2018 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 12297 TVD** 6934 Plug Back Total Depth MD 12237 TVD** 6933

Elevations GR 4784 KB 4814

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

List Electric Logs Run:

CBL, MWD/LWD, Neutron

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	1,947	691	0	1,947	VISU
1ST	8+1/2	5+1/2	20	0	12,285	1,309	1,938	12,285	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	496				
PIERRE	618				
PARKMAN	3,732				
SUSSEX	4,169				
SHANNON	4,991				
TEEPEE BUTTES	6,104				
NIOBRARA	6,933				

Comment:

TPZ is actual.

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>					
401570586	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401988325	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>					
401658081	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401658083	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401658129	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401658135	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401658139	PDF-NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401658145	LAS-NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401658153	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	•Returned to draft at Operator's request	03/28/2019

Total: 1 comment(s)

