

DRILLING COMPLETION REPORT

Document Number:
401848716

Date Received:

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 05-123-44969-00 County: WELD
 Well Name: Wells Ranch Well Number: BB11-682
 Location: QtrQtr: NWNW Section: 11 Township: 5N Range: 63W Meridian: 6
 Footage at surface: Distance: 728 feet Direction: FNL Distance: 235 feet Direction: FWL
 As Drilled Latitude: 40.419189 As Drilled Longitude: -104.412688

GPS Data:
 Date of Measurement: 08/08/2017 PDOP Reading: 3.5 GPS Instrument Operator's Name: Toa Sagapolutele

** If directional footage at Top of Prod. Zone Dist.: 553 feet. Direction: FNL Dist.: 332 feet. Direction: FWL
 Sec: 11 Twp: 5N Rng: 63W
 ** If directional footage at Bottom Hole Dist.: 453 feet. Direction: FNL Dist.: 16 feet. Direction: FEL
 Sec: 12 Twp: 5N Rng: 63W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 08/24/2017 Date TD: 08/28/2017 Date Casing Set or D&A: 08/29/2017
 Rig Release Date: 09/05/2017 Per Rule 308A.b.

Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 17237 TVD** 6620 Plug Back Total Depth MD 17182 TVD** 6620
 Elevations GR 4685 KB 4715 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, Mud, MWD/LWD, (Neutron in 123-44968)

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	42.09	0	110	64	0	110	CALC
SURF	13+1/2	9+5/8	36	0	1,943	693	0	1,943	VISU
1ST	8+1/2	5+1/2	20	0	17,227	1,889	2,316	17,227	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 BASE	309				
PIERRE	1,555				
SUSSEX	4,006				
SHANNON	5,005				
TEEPEE BUTTES	5,830				
SHARON SPRINGS	6,420				
NIOBRARA	6,772				
FORT HAYS	6,901				
CODELL	7,408				

Comment:

TPZ is actual.

No Open Hole Logs run. Per Rule 317.p. Neutron log run on WELLS RANCH BB11-667 (123-44968).

As Drilled GPS was surveyed after conductor was set.

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 ?	
Attachment Checklist			
401848719	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401848717	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"/>
Other Attachments			
401848718	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401848720	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401848721	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401848722	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401848723	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401848725	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401848726	LAS-MUD	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)

