

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:

402002615

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 05-123-44476-00

County: WELD

Well Name: Harper

Well Number: A21-669

Location: QtrQtr: NWSW Section: 21 Township: 6N Range: 64W Meridian: 6

Footage at surface: Distance: 2345 feet Direction: FSL Distance: 950 feet Direction: FWL

As Drilled Latitude: 40.470694 As Drilled Longitude: -104.561173

## GPS Data:

Date of Measurement: 01/07/2019 PDOP Reading: 3.3 GPS Instrument Operator's Name: Toa Sagapolutele

\*\* If directional footage at Top of Prod. Zone Dist.: 1441 feet. Direction: FNL Dist.: 1223 feet. Direction: FWL

Sec: 21 Twp: 6N Rng: 64W

\*\* If directional footage at Bottom Hole Dist.: 1399 feet. Direction: FNL Dist.: 122 feet. Direction: FEL

Sec: 22 Twp: 6N Rng: 64W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/08/2019 Date TD: 02/11/2019 Date Casing Set or D&amp;A: 02/12/2019

Rig Release Date: 02/23/2019 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 16585 TVD\*\* 6785 Plug Back Total Depth MD 16518 TVD\*\* 6785

Elevations GR 4743 KB 4773 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

MWD/LWD, (Neutron in 123-44541)

## 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	1,931	673	0	1,931	VISU
1ST	8+1/2	5+1/2	17	0	16,565	1,683	2,425	16,565	CALC

## 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	371				
PIERRE	511				
PARKMAN	3,705				
SUSSEX	4,277				
SHANNON	5,154				
TEEPEE BUTTES	6,191				
SHARON SPRINGS	6,994				
NIOBRARA	7,056				

Comment:

As drilled GPS was surveyed after conductor was set.

TPZ is estimated, actual TPZ will be submitted on form 5A.

Alternative Logging Exception: No Open Hole Logs ran per rule 317.p Neutron ran on Kona A19-646 (123-44541).

Noble will run the CBL prior to completing (perforating) the well. The CBL will be submitted via Sundry Notice immediately after it is run. The top of cement calculation is based on contractor's cement tickets.

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>		
402003072	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402010874	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>		
402010872	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402010878	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402010887	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402010890	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)

