

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:

402017479

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 05-123-48565-00

County: WELD

Well Name: Vogler State

Well Number: D21-760

Location: QtrQtr: SWSW Section: 21 Township: 3N Range: 64W Meridian: 6

Footage at surface: Distance: 915 feet Direction: FSL Distance: 1048 feet Direction: FWL

As Drilled Latitude: 40.206240 As Drilled Longitude: -104.561973

GPS Data:

Date of Measurement: 02/20/2019 PDOP Reading: 2.1 GPS Instrument Operator's Name: Toa Sagapolutele

** If directional footage at Top of Prod. Zone Dist.: 201 feet. Direction: FSL Dist.: 1980 feet. Direction: FWL

Sec: 21 Twp: 3N Rng: 64W

** If directional footage at Bottom Hole Dist.: 198 feet. Direction: FNL Dist.: 1948 feet. Direction: FWL

Sec: 16 Twp: 3N Rng: 64W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/27/2019 Date TD: 03/11/2019 Date Casing Set or D&A: 03/12/2019

Rig Release Date: 03/18/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17761 TVD** 6903 Plug Back Total Depth MD 17694 TVD** 6903

Elevations GR 4794 KB 4824

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

List Electric Logs Run:

CBL, Mud, MWD/LWD, (NEU in 123-48572)

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	1,949	674	0	1,949	VISU
1ST	8+1/2	5+1/2	20	0	17,742	1,825	3,046	17,742	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	3,784				
SUSSEX	4,198				
SHANNON	5,096				
TEEPEE BUTTES	6,320				
SHARON SPRINGS	7,037				
NIOBRARA	7,115				

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 VOGLER STATE D21-780 (123-48572).

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>			
402043168	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402045331	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>			
402044733	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402044736	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402044741	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402044742	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402044744	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)

