

FORM
5ARev
06/12

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:

402116470

Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100322 4. Contact Name: Craig Richardson
 2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4232
 3. Address: 1001 NOBLE ENERGY WAY Fax: _____
 City: HOUSTON State: TX Zip: 77070 Email: Denverregulatory@nblenergy.com

5. API Number 05-123-48561-00 6. County: WELD
 7. Well Name: Vogler State Well Number: D21-790
 8. Location: QtrQtr: SESE Section: 21 Township: 3N Range: 64W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATIONTreatment Date: 05/13/2019 End Date: 05/22/2019 Date of First Production this formation: 07/13/2019Perforations Top: 7750 Bottom: 17518 No. Holes: 1280 Hole size: 0.42Provide a brief summary of the formation treatment: Open Hole: ☐

Niobrara completed with 183 bbls 15% HCl, 31,735 bbls slurry, 837,909 lbs 100 mesh, 15,771,419 lbs 40/70

This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 331918Max pressure during treatment (psi): 8281

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: _____

Min frac gradient (psi/ft): 0.98Total acid used in treatment (bbl): 183Number of staged intervals: 41

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): 0Fresh water used in treatment (bbl): 331735Disposition method for flowback: DISPOSALTotal proppant used (lbs): 16609328Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 07/18/2019 Hours: 24 Bbl oil: 302 Mcf Gas: 765 Bbl H2O: 425Calculated 24 hour rate: Bbl oil: 302 Mcf Gas: 765 Bbl H2O: 425 GOR: 2533Test Method: Flowing Casing PSI: 2593 Tubing PSI: 2010 Choke Size: 18/64Gas Disposition: SOLD Gas Type: WET Btu Gas: 1301 API Gravity Oil: 42Tubing Size: 2 + 3/8 Tubing Setting Depth: 7205 Tbg setting date: 06/25/2019 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

Comment:

Actual TPZ reported on Form 5.

This well did not flowback, the well went straight to the production facility.

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 **Name**

--	--

Total Attach: 0 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
--	--	------------------------

Total: 0 comment(s)