

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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

5. API Number 05-123-23267-00 6. County: WELD 7. Well Name: Dr. Joe CC Well Number: 06-16 8. Location: QtrQtr: SESE Section: 6 Township: 4N Range: 63W Meridian: 6 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J SAND Status: TEMPORARILY ABANDONED Treatment Type: Treatment Date: End Date: Date of First Production this formation: 01/26/2006 Perforations Top: 7068 Bottom: 7104 No. Holes: 124 Hole size: 0.34 Provide a brief summary of the formation treatment: Open Hole: This formation is commingled with another formation: Total fluid used in treatment (bbl): Max pressure during treatment (psi): Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): Type of gas used in treatment: Min frac gradient (psi/ft): Total acid used in treatment (bbl): Number of staged intervals: Recycled water used in treatment (bbl): Flowback volume recovered (bbl): Fresh water used in treatment (bbl): Disposition method for flowback: Total proppant used (lbs): Rule 805 green completion techniques were utilized: Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: Hours: Bbl oil: Mcf Gas: Bbl H2O: Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR: Test Method: Casing PSI: Tubing PSI: Choke Size: Gas Disposition: Gas Type: Btu Gas: API Gravity Oil: Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production: TA for WBI 3/21/2019: CIBP set at 6310' w 2 sxs cmt 3/21/2019: CIBP set at 7012' w 2 sxs cmt

Date formation Abandoned: 03/21/2019 Squeeze: Yes No If yes, number of sacks cmt ** Bridge Plug Depth: 6310 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

Comment:

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: 5/12/2019 Email julie.webb@nblenergy.com
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Attachment Check List

| <u>Att Doc Num</u> | <u>Name</u> |
|--------------------|---------------------------|
| 402025685 | COMPLETED INTERVAL REPORT |
| 402025690 | OPERATIONS SUMMARY |
| 402046102 | FORM 5A SUBMITTED |

Total Attach: 3 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|--|---------------------|
| Permit | •Two bridge plugs set @ 7012' w/ 2 sxs cement & 6310' w/ 2 sxs cement per attached Doc. 402025690. | 05/16/2019 |

Total: 1 comment(s)