

**FORM**  
**5**Rev  
10/14**State of Colorado**  
**Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402147507

Date Received:

**DRILLING COMPLETION REPORT**

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

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

Email: stephany.olsen@nblenergy.com

API Number 05-123-48624-00

County: WELD

Well Name: Guttersen State

Well Number: D23-741

Location: QtrQtr: SWSE

Section: 23

Township: 3N

Range: 64W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 761 feet

Direction: FSL

Distance: 1511 feet

Direction: FEL

As Drilled Latitude: 40.205696

As Drilled Longitude: -104.514576

GPS Data:

Date of Measurement: 06/05/2019

PDOP Reading: 2.7

GPS Instrument Operator's Name: Toa Sagapolutele

FNL/FSL

FEL/FWL

\*\* If directional footage at Top of Prod. Zone

Dist: 195 feet

Direction: FSL

Dist: 2057 feet

Direction: FEL

Sec: 23

Twp: 3N

Rng: 64W

FNL/FSL

FEL/FWL

\*\* If directional footage at Bottom Hole

Dist: 201 feet

Direction: FNL

Dist: 1967 feet

Direction: FEL

Sec: 14

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) 06/16/2019

Date TD: 06/21/2019

Date Casing Set or D&amp;A: 06/22/2019

Rig Release Date: 07/09/2019 Per Rule 308A.b.

Well Classification:



Dry



Oil



Gas/Coalbed



Disposal



Stratigraphic



Enhanced Recovery



Storage



Observation

Total Depth MD 17637

TVD\*\* 6826

Plug Back Total Depth MD 17570

TVD\*\* 6826

Elevations GR

4810

KB

4840

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



List Electric Logs Run:

MWD/LWD, (IND in 05-123-11335)

**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	1,957	658	0	1,957	VISU
1ST	8+1/2	5+1/2	17	0	17,618	1,820	2,500	17,618	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	
PARKMAN	3,887				
SUSSEX	4,107				
TEEPEE BUTTES	6,230				
SHARON SPRINGS	6,940				
NIOBRARA	7,025				

Operator Comments:

TPZ is estimated. Actual will be submitted on 5A.

As drilled GPS was surveyed after conductor was set.

Alternative Logging Program: No open hole logs run per rule 317.p. Induction ran on Two E Ranch 1-23 (05-123-11335).

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: Stephany OlsenTitle: Regulatory Analyst Date: \_\_\_\_\_ Email: stephany.olsen@nblenergy.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402167083	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402168371	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>			
402167086	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402167088	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402167090	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402168383	DIRECTIONAL DATA	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)

