

**FORM**  
**5**Rev  
02/20**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:

402484440

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: Denverregulatory@nbleenergy.com

API Number 05-123-48642-00

County: WELD

Well Name: Guttersen

Well Number: YY06-775

Location: QtrQtr: SESW Section: 30 Township: 3N Range: 63W Meridian: 6  
FNL/FSL FEL/FWL

Footage at surface: Distance: 601 feet Direction: FSL Distance: 2540 feet Direction: FWL

As Drilled Latitude: 40.190800 As Drilled Longitude: -104.481272

GPS Data: GPS Quality Value: 2.9 Type of GPS Quality Value: PDOP Date of Measurement: 07/31/2020

GPS Instrument Operator's Name: Toa Sagapolutele

FNL/FSL

FEL/FWL

\*\* If directional footage at Top of Prod. Zone Dist: 216 feet Direction: FNL Dist: 989 feet Direction: FWL  
Sec: 31 Twp: 3N Rng: 63W

FNL/FSL

FEL/FWL

\*\* If directional footage at Bottom Hole Dist: 200 feet Direction: FSL Dist: 970 feet Direction: FWL  
Sec: 6 Twp: 2N Rng: 63W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/11/2020 Date TD: 07/22/2020 Date Casing Set or D&amp;A: 07/23/2020

Rig Release Date: 07/28/2020 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17480 TVD\*\* 6685 Plug Back Total Depth MD 17417 TVD\*\* 6685

Elevations GR 4791 KB 4821

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

List Electric Logs Run:

MWD/LWD, CBL, (Resistivity in API 123-48640)

**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	652	0	1,931	VISU
1ST	8+1/2	5+1/2	17	0	17,465	1,800	2,571	17,465	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	4,177				
SHANNON	5,067				
TEEPEE BUTTES	6,113				
SHARON SPRINGS	6,836				
NIOBRARA	6,900				

Operator Comments:

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

As drilled GPS was surveyed after conductor was set.

Alternative Logging Exception: No Open hole logs ran per rule 317.p. RES ran on GUTTERSEN STATE DD30-785 (123-48640).

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>					
402492179	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
402492172	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>					
402492159	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402492173	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402492187	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402492190	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402492197	PDF-CEMENT BOND	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)

