

FORM
5

Rev
12/20

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:

403428000

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: <u>100322</u>	Contact Name: <u>Mosiah Montoya</u>
Name of Operator: <u>NOBLE ENERGY INC</u>	Phone: <u>(303) 228-4000</u>
Address: <u>2001 16TH STREET SUITE 900</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>DenverRegulatory@chevron.onmicroso</u> <u>ft.com</u>

API Number <u>05-123-49290-00</u>	County: <u>WELD</u>
Well Name: <u>Guttersen State</u>	Well Number: <u>C36-765</u>
Location: QtrQtr: <u>NENW</u> Section: <u>1</u> Township: <u>3N</u> Range: <u>64W</u> Meridian: <u>6</u>	
	FNL/FSL FEL/FWL
Footage at surface: Distance: <u>466</u> feet Direction: <u>FNL</u> Distance: <u>1684</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>40.260456</u> As Drilled Longitude: <u>-104.502808</u>	
GPS Data: GPS Quality Value: <u>1.9</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>01/24/2023</u>	
	FNL/FSL FEL/FWL
** If directional footage at Top of Prod. Zone Dist: <u>202</u> feet Direction: <u>FSL</u> Dist: <u>1623</u> feet Direction: <u>FWL</u>	
Sec: <u>36</u> Twp: <u>4N</u> Rng: <u>64W</u>	
	FNL/FSL FEL/FWL
** If directional footage at Bottom Hole Dist: <u>2423</u> feet Direction: <u>FSL</u> Dist: <u>1626</u> feet Direction: <u>FWL</u>	
Sec: <u>24</u> Twp: <u>4N</u> Rng: <u>64W</u>	
Field Name: <u>WATTENBERG</u> Field Number: <u>90750</u>	
Federal, Indian or State Lease Number: <u>OG 7887 70</u>	

Spud Date: (when the 1st bit hit the dirt) 03/29/2023 Date TD: 04/18/2023 Date Casing Set or D&A: 04/19/2023
 Rig Release Date: 04/26/2023 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD <u>19843</u> TVD** <u>6674</u> Plug Back Total Depth MD <u>19810</u> TVD** <u>6674</u>

Elevations GR <u>4746</u> KB <u>4775</u> Digital Copies of ALL Logs must be Attached <input checked="" type="checkbox"/>

List All Logs Run:

CBL, MWD/LWD, (IND in 123-21123)

FLUID VOLUMES USED IN DRILLING OPERATIONS

(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): 1257 Fresh Water (bbls): 1112

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 145

CASING, LINER AND CEMENT

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>	<u>Status</u>
CONDUCTOR	26	16	A-52A	36.94	0	109	64	109	0	CALC
SURF	13+1/2	9+5/8	J-55	36	0	1930	707	1930	0	VISU
1ST	8+1/2	5+1/2	P-110	17	0	19830	2268	19830	1083	CBL

Bradenhead Pressure Action Threshold 579 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

<u>Method used</u>	<u>String</u>	<u>Cementing tool setting/perf depth</u>	<u>Cement volume</u>	<u>Cement top</u>	<u>Cement bottom</u>

Details of work:

FORMATION LOG INTERVALS AND TEST ZONES

<u>FORMATION NAME</u>	<u>Measured Depth</u>		<u>Check if applies</u>		<u>COMMENTS (All DST and Core Analysis must be submitted to COGCC)</u>
	<u>Top</u>	<u>Bottom</u>	<u>DST</u>	<u>Cored</u>	
PARKMAN	3,583				
SUSSEX	3,988				
SHANNON	4,842				
TEEPEE BUTTES	5,853				
SHARON SPRINGS	6,573				
NIOBRARA	6,657				

Operator Comments:

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

As drilled GPS was surveyed after conductor was set.

Alternative logging Program: No open hole logs were ran per rule 408.r IND log ran on Abbey D1-3 (123-21123).

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Kim Bauer

Title: Regulatory Analyst II

Date: _____

Email: kimberlybauer@chevron.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
403428061	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
403436422	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"/>
Other Attachments			
403436374	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403436376	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403436402	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403436409	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)