

FORM
5A

Rev
09/20

State of Colorado

Energy & Carbon Management Commission

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



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Document Number:

403823445

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. ECMC Operator Number: 100322

2. Name of Operator: NOBLE ENERGY INC

3. Address: 1099 18TH STREET SUITE 1500

City: DENVER State: CO Zip: 80202

4. Contact Name: Randy Thweatt

Phone: (303) 228-4000

Fax:

Email: denverregulatory@chevron.onmicrosoft.com

5. API Number 05-123-48931-00

7. Well Name: Guttersen

8. Location: QtrQtr: SWSE Section: 33 Township: 4N Range: 64W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: C28-745

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING
Treatment Date: 04/09/2024 End Date: 04/22/2024 Date this Formation was Completed: 05/17/2024
Perforations Top: 7420 Bottom: 17051 No. Holes: 1288 Hole size: 38/100 Open Hole: ☐

Describe the Formation Treatment, including the following: type of fluid used (gel, slickwater, etc.), type and concentration of acid used (HCl, HF, etc.), types and amounts of proppant(s) used, depth details of multiple zones, and method used to determine flowback volume.

Niobrara completed with 386 bbls 28% HCL, 190 bbls HCR-7000 WL, 292,209 bbls slurry, 25,795 bbls recycled water, 15,982,836 lb 40/140 sand.

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 318580 Max pressure during treatment (psi): 8444
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): 0.89
Total acid used in treatment (bbl): 576 Number of staged intervals: 46
Recycled or Reused Fluids used in treatment (bbl): 25795 Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 292209 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 15982836

Fracture stimulations must be reported on [FracFocus.org](https://www.fracfocus.org)

Test Information:

05/24/2023 Hours: 24 Bbl oil: 288 Mcf Gas: 935 Bbl H2O: 326
Date Calculated 24 hour rate: Bbl oil: 288 Mcf Gas: 935 Bbl H2O: 326 GOR: 3247
Test Method: Flowing Casing PSI: 2847 Tubing PSI: 1999 Choke Size: 18/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1274 API Gravity Oil: 42
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7102 Tbg setting date: 05/06/2024 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 is Sec 33, T4N 64W: 417' FSL, 2302' FEL

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

Drilling Beyond the Unit Boundary Setback:

1. Bottom perf interval 491' FNL, 2319' FEL, Section 28, T4N, R64W
2. This well is a cemented monobore, the wellbore is physically isolated with cement.
3. None of the wellbore beyond the setback was completed.

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 LIST

Att Doc Num Name

403823457 WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)