

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:

403823465

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 05-123-48932-00

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: C28-735

## 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: 7195 Bottom: 17035 No. Holes: 1316 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 348 bbls 28% HCL, 190 bbls HCR-7000 WL, 426,282 bbls slurry, 45,472 bbls recycled water, 16,900,725 lb 40/140 sand.

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

Total fluid used in treatment (bbl): 472292 Max pressure during treatment (psi): 7783  
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): 0.93  
Total acid used in treatment (bbl): 538 Number of staged intervals: 47  
Recycled or Reused Fluids used in treatment (bbl): 45472 Flowback volume recovered (bbl): 0  
Fresh water used in treatment (bbl): 426282 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 16900725

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

### Test Information:

05/24/2024 Hours: 24 Bbl oil: 407 Mcf Gas: 1429 Bbl H2O: 387  
Date Calculated 24 hour rate: Bbl oil: 407 Mcf Gas: 1429 Bbl H2O: 387 GOR: 3511  
Test Method: Flowing Casing PSI: 2874 Tubing PSI: 1820 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: 7094 Tbg setting date: 05/08/2024 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: 215' FSL, 1635' FEL

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

Drilling Beyond the Unit Boundary Setback:

1. Bottom perf interval 465' FNL, 1645' 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
403823469	WELLBORE DIAGRAM

Total Attach: 1 Files

**General Comments**

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

Total: 0 comment(s)