

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:

403722638

Date Received:

03/20/2024

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 05-123-49055-00

7. Well Name: Shelton

8. Location: QtrQtr: NWNW Section: 1 Township: 3N Range: 65W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: H03-665

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING
Treatment Date: 12/26/2023 End Date: 01/11/2024 Date this Formation was Completed: 02/23/2024
Perforations Top: 7603 Bottom: 17538 No. Holes: 1316 Hole size: 0.38 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 595 bbls 28% HCL, 548,957 bbls slurry, 31,910 bbls recycled water, 16,793,545 lbs 100 mesh

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

Total fluid used in treatment (bbl): 581462 Max pressure during treatment (psi): 8463
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): 0.97
Total acid used in treatment (bbl): 595 Number of staged intervals: 47
Recycled or Reused Fluids used in treatment (bbl): 31910 Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 548957 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 16793545

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

Test Information:

03/01/2024 Hours: 24 Bbl oil: 212 Mcf Gas: 1457 Bbl H2O: 184
Date Calculated 24 hour rate: Bbl oil: 212 Mcf Gas: 1457 Bbl H2O: 184 GOR: 6873
Test Method: Flowing Casing PSI: 2920 Tubing PSI: 2338 Choke Size: 18/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1260 API Gravity Oil: 42
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7450 Tbg setting date: 02/17/2024 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:

TPZ calculation: Actual TPZ is Sec 2, T3N 65W: 1662' FSL, 163' FEL

Drilling Beyond the Unit Boundary Setback:

1. Bottom perf interval 1630' FSL, 694' FWL, Section 3, T3N, R65W
2. This well is a cemented monobore, the wellbore is physically isolated with cement.
3. None of the wellbore beyond the setback was completed.

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

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: 3/20/2024 Email: kimberlybauer@chevron.com

ATTACHMENT LIST

Att Doc Num	Name
403722638	FORM 5A SUBMITTED
403722750	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Permit review complete - Passed Task	12/16/2024

Total: 1 comment(s)