

FORM  
5A  
Rev  
02/08

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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COMPLETED INTERVAL REPORT

Document Number:  
400095449

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. OGCC Operator Number: 100322  
2. Name of Operator: NOBLE ENERGY INC  
3. Address: 1625 BROADWAY STE 2200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Andrea Rawson  
Phone: (303) 228-4253  
Fax: (303) 228-4286

5. API Number 05-123-20415-00  
6. County: WELD  
7. Well Name: JURGENS  
Well Number: 8-14  
8. Location: QtrQtr: SENE Section: 8 Township: 5N Range: 64W Meridian: 6

Completed Interval

FORMATION: CODELL Status: SHUT IN  
Treatment Date: 05/22/2010 Date of First Production this formation:  
Perforations Top: 6801 Bottom: 6811 No. Holes: 40 Hole size:  
Provide a brief summary of the formation treatment: Open Hole:   
Codell under sand plug.  
This formation is commingled with another formation:  Yes  No  
Test Information:  
Date: Hours: Bbls oil: Mcf Gas: Bbls H2O:  
Calculated 24 hour rate: Bbls oil: Mcf Gas: Bbls H2O: GOR:  
Test Method: Casing PSI: Tubing PSI: Choke Size:  
Gas Disposition: Gas Type: BTU Gas: API Gravity Oil:  
Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:  
Reason for Non-Production:  
Will be commingled at a later date.  
Date formation Abandoned: Squeeze:  Yes  No If yes, number of sacks cmt  
Bridge Plug Depth: Sacks cement on top:

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 05/22/2010 Date of First Production this formation: 05/25/2010

Perforations Top: 6506 Bottom: 6710 No. Holes: 96 Hole size: 0.73

Provide a brief summary of the formation treatment: Open Hole:

Frac'd Niobrara w/ 274,226 gals of Slick water and 15% HCl with 400,060#'s of Ottawa sand.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 06/02/2010 Hours: 24 Bbls oil: 20 Mcf Gas: 70 Bbls H2O: 13

Calculated 24 hour rate: Bbls oil: 20 Mcf Gas: 70 Bbls H2O: 13 GOR: 3500

Test Method: Floing Casing PSI: 180 Tubing PSI: 0 Choke Size: 14

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1260 API Gravity Oil: 58

Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ 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: \_\_\_\_\_

Comment:

\_\_\_\_\_

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

Signed: \_\_\_\_\_ Print Name: Andrea Rawson

Title: Regulatory Specialist Date: \_\_\_\_\_ Email arawson@nobleenergyinc.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_