

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with 4 columns: DE, ET, OE, ES

Document Number:

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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. 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: Eileen Roberts
Phone: (303) 2284330
Fax: (303) 2284286

5. API Number 05-123-30947-00
6. County: WELD
7. Well Name: Horse Iron P
Well Number: 22-32D
8. Location: QtrQtr: SENE Section: 21 Township: 3N Range: 67W Meridian: 6
9. Field Name: Field Code:

Completed Interval

FORMATION: CODELL Status: PRODUCING
Treatment Date: 08/02/2010 Date of First Production this formation: 08/06/2010
Perforations Top: 7191 Bottom: 7210 No. Holes: 76 Hole size: 41
Provide a brief summary of the formation treatment: Open Hole: []
Frac'd Codell w/ 134484 gals of Silverstim and Slick Water with 272,909#'s of Ottawa sand.
The Codell is producing through a Composite Flow Through Plug.
This formation is commingled with another formation: [X] 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:
Date formation Abandoned: Squeeze: [] Yes [] No If yes, number of sacks cmt
Bridge Plug Depth: Sacks cement on top:

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: 08/02/2010 Date of First Production this formation: 08/06/2010

Perforations Top: 6992 Bottom: 7652 No. Holes: 212 Hole size: 0

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

Commingle J-Sand / Codell / Niobrara

This formation is commingled with another formation: Yes No

Test Information:

Date: 08/13/2010 Hours: 24 Bbls oil: 6 Mcf Gas: 14 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 6 Mcf Gas: 14 Bbls H2O: 0 GOR: 2333

Test Method: Flowing Casing PSI: 1680 Tubing PSI: 0 Choke Size: 010/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1285 API Gravity Oil: 59

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: _____

FORMATION: J SAND Status: PRODUCING

Treatment Date: 08/02/2010 Date of First Production this formation: 08/06/2010

Perforations Top: 7622 Bottom: 7652 No. Holes: 88 Hole size: 41

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

Frac'd J-Sand w/ 147126 gals of Silverstim and Slick Water with 278,299#'s of Ottawa sand.

The J-Sand is producing through a Composite Flow Through 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: _____

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: 08/02/2010 Date of First Production this formation: 08/06/2010

Perforations Top: 6992 Bottom: 7064 No. Holes: 48 Hole size: 73

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

Frac'd Niobrara w/ 173670 gals of Silverstim and Slick Water with 253,062#s of Ottawa sand.

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:

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: Eileen Roberts

Title: Regulatory Specialist Date: _____ Email eroberts@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: _____