

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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Document Number:

400100536

**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 4. Contact Name: Justin Garrett  
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4449  
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286  
City: DENVER State: CO Zip: 80202

5. API Number 05-123-21073-00 6. County: WELD  
7. Well Name: CAPITAL Well Number: 31-19  
8. Location: QtrQtr: NWNE Section: 19 Township: 4N Range: 63W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 07/12/2010 Date of First Production this formation: 10/19/2005  
Perforations Top: 6704 Bottom: 6716 No. Holes: 48 Hole size: 41/100

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

Codell Refrac  
The codell is producing through composite flow through plug  
Frac'd Codell w/ 137773 gals pHaserFrac with 246160 lbs 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: \_\_\_\_\_

FORMATION: <u>  NIOBRARA-CODELL  </u>			Status: <u>  PRODUCING  </u>		
Treatment Date: <u>  07/16/2010  </u>		Date of First Production this formation: <u>  07/18/2010  </u>			
Perforations	Top: <u>  6436  </u>	Bottom: <u>  6716  </u>	No. Holes: <u>  120  </u>	Hole size: <u>          </u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Codell Refrac & Niobrara Recomplete Codell & Niobrara are commingled The Codell & Niobrara are producing through composite flow through plugs					
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>Test Information:</b>					
Date: <u>  07/23/2010  </u>	Hours: <u>  24  </u>	Bbls oil: <u>  13  </u>	Mcf Gas: <u>  55  </u>	Bbls H2O: <u>  14  </u>	
Calculated 24 hour rate:		Bbls oil: <u>  13  </u>	Mcf Gas: <u>  55  </u>	Bbls H2O: <u>  14  </u>	GOR: <u>  4231  </u>
Test Method: <u>  Flowing  </u>		Casing PSI: <u>  1100  </u>	Tubing PSI: <u>  0  </u>	Choke Size: <u>  12/64  </u>	
Gas Disposition: <u>  SOLD  </u>		Gas Type: <u>  WET  </u>	BTU Gas: <u>  1351  </u>	API Gravity Oil: <u>  50  </u>	
Tubing Size: <u>          </u>		Tubing Setting Depth: <u>          </u>	Tbg setting date: <u>          </u>	Packer Depth: <u>          </u>	
Reason for Non-Production:					
Date formation Abandoned: <u>          </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u>          </u>		
Bridge Plug Depth: <u>          </u>		Sacks cement on top: <u>          </u>			

FORMATION: <u>  NIOBRARA  </u>			Status: <u>  COMMINGLED  </u>		
Treatment Date: <u>  07/16/2010  </u>		Date of First Production this formation: <u>  07/18/2010  </u>			
Perforations	Top: <u>  6436  </u>	Bottom: <u>  6592  </u>	No. Holes: <u>  72  </u>	Hole size: <u>  73/100  </u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Niobrara recomplete The Niobrara is producing through composite flow through plug Frac'd Niobrara w/ 266374 gals pHaserFrac, Acid, and Slick Water with 400320 lbs Ottawa sand					
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Test Information:</b>					
Date: <u>          </u>	Hours: <u>          </u>	Bbls oil: <u>          </u>	Mcf Gas: <u>          </u>	Bbls H2O: <u>          </u>	
Calculated 24 hour rate:		Bbls oil: <u>          </u>	Mcf Gas: <u>          </u>	Bbls H2O: <u>          </u>	GOR: <u>          </u>
Test Method: <u>          </u>		Casing PSI: <u>          </u>	Tubing PSI: <u>          </u>	Choke Size: <u>          </u>	
Gas Disposition: <u>          </u>		Gas Type: <u>          </u>	BTU Gas: <u>          </u>	API Gravity Oil: <u>          </u>	
Tubing Size: <u>          </u>		Tubing Setting Depth: <u>          </u>	Tbg setting date: <u>          </u>	Packer Depth: <u>          </u>	
Reason for Non-Production:					
Date formation Abandoned: <u>          </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u>          </u>		
Bridge Plug Depth: <u>          </u>		Sacks cement on top: <u>          </u>			

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

Signed: \_\_\_\_\_

Print Name: Justin Garrett

Title: Regulatory Specialist

Date: \_\_\_\_\_

Email: JDGarrett@nobleenergyinc.com

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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: \_\_\_\_\_