

FORMATION: NIORARA-CODELL Status: PRODUCING

Treatment Date: 06/17/2010 Date of First Production this formation: 10/30/2008

Perforations Top: 6750 Bottom: 6916 No. Holes: 112 Hole size: _____

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

Codell & Niobrara are commingled

This formation is commingled with another formation: Yes No

Test Information:

Date: 06/30/2010 Hours: 24 Bbls oil: 4 Mcf Gas: 0 Bbls H2O: 22

Calculated 24 hour rate: _____ Bbls oil: 4 Mcf Gas: 0 Bbls H2O: 22 GOR: 0

Test Method: Flowing Casing PSI: 800 Tubing PSI: 0 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1322 API Gravity Oil: 51

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: Justin Garrett

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