

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



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

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 05-123-30486-00

6. County: WELD

7. Well Name: WELLS RANCHUSX AE

Well Number: 19-09P

8. Location: QtrQtr: NESE Section: 19 Township: 6N Range: 62W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBARRA-CODELL

Status: PRODUCING

Treatment Date: 06/10/2010

Date of First Production this formation: 06/22/2010

Perforations Top: 6430 Bottom: 6702 No. Holes: 104 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

Codell & Niobrara are commingled
Codell 6694'-6702', 32 holes, .41"
Frac'd Codell w/100547 gals Silverstim, Acid, and Slick Water with 199820 lbs Ottawa sand
Niobrara 6430'-6600', 72 holes, .73"
Frac'd Niobrara w/274224 gals Silverstim, Acid, and Slick Water with 401860 lbs Ottawa sand

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

Test Information:

Date: 06/29/2010 Hours: 24 Bbls oil: 55 Mcf Gas: 40 Bbls H2O: 10

Calculated 24 hour rate: Bbls oil: 55 Mcf Gas: 40 Bbls H2O: 10 GOR: 727

Test Method: Flowing Casing PSI: 1490 Tubing PSI: 820 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1245 API Gravity Oil: 43

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6663 Tbg setting date: 06/18/2010 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

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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: _____