

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

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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: Justin Garrett
Phone: (303) 228-4449
Fax: (303) 228-4286

5. API Number 05-123-30551-00
6. County: WELD
7. Well Name: KOHLHOFF USX AB
Well Number: 21-06P
8. Location: QtrQtr: SENW Section: 21 Township: 7N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 08/27/2010 Date of First Production this formation: 08/27/2010

Perforations Top: 6912 Bottom: 7218 No. Holes: 96 Hole size: _____

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

Codell & Niobrara are commingled
The Codell is producing through composite flow through plug.
Codell 7206'-7218', 48 holes, .38"
Frac'd Codell w/134190 gals Silverstim, Acid, and Slick Water with 271564 lbs Ottawa sand
Niobrara 7036'-7048', 48 holes, .73"
Frac'd Niobrara w/175476 gals Silverstim and Slick Water with 252378 lbs Ottawa sand

This formation is commingled with another formation: Yes No

Test Information:

Date: 08/28/2010 Hours: 24 Bbls oil: 38 Mcf Gas: 0 Bbls H2O: 0

Calculated 24 hour rate: _____ Bbls oil: 38 Mcf Gas: 0 Bbls H2O: 0 GOR: 0

Test Method: Flowing Casing PSI: 1475 Tubing PSI: 900 Choke Size: 26/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1250 API Gravity Oil: 40

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7184 Tbg setting date: 09/16/2010 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

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: _____