

FORM  
5  
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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DRILLING COMPLETION REPORT

Document Number:

400117843

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type  Final completion  Preliminary completion

1. OGCC Operator Number: 100322 4. Contact Name: EILEEN ROBERTS  
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330  
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286  
City: DENVER State: CO Zip: 80202

5. API Number 05-123-32086-00 6. County: WELD  
7. Well Name: DeJong USX Well Number: AB13-06P  
8. Location: QtrQtr: SENW Section: 13 Township: 7N Range: 64W Meridian: 6  
Footage at surface: Distance: 2120 feet Direction: FNL Distance: 1980 feet Direction: FWL  
As Drilled Latitude: 40.574770 As Drilled Longitude: -104.499910

GPS Data:

Data of Measurement: 10/28/2010 PDOP Reading: 3.6 GPS Instrument Operator's Name: Paul Tappy

\*\* If directional footage

at Top of Prod. Zone Distance: feet Direction: Distance: feet Direction:  
Sec: Twp: Rng:  
at Bottom Hole Distance: feet Direction: Distance: feet Direction:  
Sec: Twp: Rng:

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 09/15/2010 13. Date TD: 09/18/2010 14. Date Casing Set or D&A: 09/19/2010

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 7184 TVD 17 Plug Back Total Depth MD 7124 TVD

18. Elevations GR 4820 KB 4833

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

GRL/CCL/CBL/VDL, CDL/CNL/ML, DIL/GL/GRL

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Top	Cement Bot	Status
SURF	12+1/4	8+5/8	24.00	818	286	0	828	
1ST	7+7/8	4+1/2	11.60	7,170	600	2,139	7,170	CBL

ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
NIOBRARA	6,697		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,977		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,000		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,075		<input type="checkbox"/>	<input type="checkbox"/>	

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 Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

**Attachment Check List**

Att Doc Num	Name
400117930	CEMENT JOB SUMMARY

Total Attach: 1 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)