

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



DE ET OE ES

DRILLING COMPLETION REPORT

Document Number:

400136423

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: Liz Lindow
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4342
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
City: DENVER State: CO Zip: 80202

5. API Number 05-045-19135-00 6. County: GARFIELD
7. Well Name: SGV FEDERAL Well Number: 8-12A (8D)
8. Location: QtrQtr: NWNW Section: 8 Township: 8S Range: 95W Meridian: 6
Footage at surface: Distance: 1235 feet Direction: FNL Distance: 325 feet Direction: FWL
As Drilled Latitude: 39.381682 As Drilled Longitude: -108.026240

GPS Data:

Data of Measurement: 08/25/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: Ron Renke

** If directional footage

at Top of Prod. Zone Distance: 1456 feet Direction: FNL Distance: 761 feet Direction: FWL
Sec: 8 Twp: 8S Rng: 96W
at Bottom Hole Distance: 1501 feet Direction: FNL Distance: 737 feet Direction: FWL
Sec: 8 Twp: 8S Rng: 86W

9. Field Name: PARACHUTE 10. Field Number: 67350

11. Federal, Indian or State Lease Number: COC58670

12. Spud Date: (when the 1st bit hit the dirt) 09/14/2010 13. Date TD: 09/22/2010 14. Date Casing Set or D&A: 09/23/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 6748 TVD 6716 17 Plug Back Total Depth MD 6662 TVD 6630

18. Elevations GR 6342 KB 6366

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:

CBL/RMT

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	24	16	84	0	104	0	0	104	CALC
SURF	12+1/4	8+5/8	24	0	1,554	363	0	1,554	CALC
1ST	7+7/8	4+1/2	11.6	0	6,738	711	3,352	6,738	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	
WILLIAMS FORK	3,695		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	6,247		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,541		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Top of Gas MD = 4803'

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

Signed: _____ Print Name: Liz Lindow

Title: Regulatory Analyst Date: 2/28/2011 Email: llindow@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name
400136434	CEMENT JOB SUMMARY
400136436	DIRECTIONAL SURVEY

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)