

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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DE ET OE ES

COMPLETED INTERVAL REPORT

Document Number:

400140304

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: Andrea Rawson
Phone: (303) 228-4253
Fax: (303) 228-4286

5. API Number 05-123-13695-00
6. County: WELD
7. Well Name: OCOMA Well Number: G35-15
8. Location: QtrQtr: SWSE Section: 35 Township: 4N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: SHUT IN
Treatment Date: 01/04/2011 Date of First Production this formation:
Perforations Top: 7106 Bottom: 7122 No. Holes: 64 Hole size:
Provide a brief summary of the formation treatment: Open Hole:
Codell under sand plug @ 7210.
This formation is commingled with another formation: Yes No
Test Information:
Date: Hours: Bbls oil: Mcf Gas: Bbls H2O:
Calculated 24 hour rate: Bbls oil: Mcf Gas: Bbls H2O: GOR:
Test Method: Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: Gas Type: BTU Gas: API Gravity Oil:
Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:
Reason for Non-Production:
Will be commingled at a later date.
Date formation Abandoned: Squeeze: Yes No If yes, number of sacks cmt
Bridge Plug Depth: Sacks cement on top:

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 01/04/2011 Date of First Production this formation: 01/05/2011

Perforations Top: 6900 Bottom: 6988 No. Holes: 64 Hole size: 73

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

RE-Frac'd Niobrara w/ 162,559 gals of Slick Water. Silverstim, and 15% HCl with 249,880#'s of Ottawa sand.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 01/14/2011 Hours: 24 Bbls oil: 5 Mcf Gas: 127 Bbls H2O: 8

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 5 Mcf Gas: 127 Bbls H2O: 8 GOR: 25400

Test Method: Flowing Casing PSI: 320 Tubing PSI: 0 Choke Size: 14

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1272 API Gravity Oil: 65

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: Andrea Rawson

Title: Regulatory Specialist Date: \_\_\_\_\_ Email arawson@nobleenergyinc.com

**Attachment Check List**

Att Doc Num	Name

Total Attach: 0 Files

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User Group	Comment	Comment Date

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