

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



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Document Number:

400169394

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 05-123-16988-00
6. County: WELD
7. Well Name: BRUZEWSKI
Well Number: 33-15F(2)
8. Location: QtrQtr: SWSE Section: 33 Township: 4N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 04/18/2011 Date of First Production this formation: 06/01/1993
Perforations Top: 7285 Bottom: 7301 No. Holes: 88 Hole size:

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

Codell was under sand plug for Niobrara refrac; removed to commingle with Niobrara
Sand plug set @ 7110' from 3/15/2011 to 4/18/2011

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:

Date formation Abandoned: Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

Bridge Plug Depth: Sacks cement on top:

FORMATION: <u> NIOBRARA-CODELL </u>		Status: <u> PRODUCING </u>	
Treatment Date: <u> 04/25/2011 </u>		Date of First Production this formation: <u> 06/01/1993 </u>	
Perforations	Top: <u> 6988 </u>	Bottom: <u> 7301 </u>	No. Holes: <u> 172 </u>
		Hole size: <u> </u>	
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
Codell & Niobrara are commingled after Niobrara refrac 3/29/2011 Codell 7285'-7301', 88 holes Niobrara 6988'-7151', 84 holes			
This formation is commingled with another formation:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:			
Date: <u> 04/27/2011 </u>	Hours: <u> 24 </u>	Bbls oil: <u> 9 </u>	Mcf Gas: <u> 257 </u>
		Bbls H2O: <u> 9 </u>	
Calculated 24 hour rate:		Bbls oil: <u> 9 </u>	Mcf Gas: <u> 257 </u>
		Bbls H2O: <u> 9 </u>	GOR: <u> 28556 </u>
Test Method: <u> Flowing </u>	Casing PSI: <u> 900 </u>	Tubing PSI: <u> 500 </u>	Choke Size: <u> 12/64 </u>
Gas Disposition: <u> SOLD </u>	Gas Type: <u> WET </u>	BTU Gas: <u> 1235 </u>	API Gravity Oil: <u> 60 </u>
Tubing Size: <u> 2 + 3/8 </u>	Tubing Setting Depth: <u> 7265 </u>	Tbg setting date: <u> 04/18/2011 </u>	Packer Depth: <u> </u>
Reason for Non-Production:			
Date formation Abandoned: <u> </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u> </u>
Bridge Plug Depth: <u> </u>		Sacks cement on top: <u> </u>	

FORMATION: <u> NIOBRARA </u>				Status: <u> COMMINGLED </u>	
Treatment Date: <u> 04/17/2011 </u>		Date of First Production this formation: <u> 06/01/1993 </u>			
Perforations	Top: <u> 6988 </u>	Bottom: <u> 7151 </u>	No. Holes: <u> 84 </u>	Hole size: <u> </u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Niobrara refrac 3/29/11; Codell was under sand plug Sand plug removed 4/18/2011 to commingle with Niobrara Frac'd Niobrara w/157422 gals Vistar, Acid, and Slick Water with 248500 lbs Ottawa sand					
This formation is commingled with another formation:			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Test Information:					
Date: <u> 04/08/2011 </u>	Hours: <u> 24 </u>	Bbls oil: <u> 6 </u>	Mcf Gas: <u> 163 </u>	Bbls H2O: <u> 7 </u>	
Calculated 24 hour rate:		Bbls oil: <u> 6 </u>	Mcf Gas: <u> 163 </u>	Bbls H2O: <u> 7 </u>	GOR: <u> 27167 </u>
Test Method: <u> Flowing </u>		Casing PSI: <u> 400 </u>	Tubing PSI: <u> 0 </u>	Choke Size: <u> 14/64 </u>	
Gas Disposition: <u> SOLD </u>		Gas Type: <u> WET </u>	BTU Gas: <u> 1235 </u>	API Gravity Oil: <u> 64 </u>	
Tubing Size: <u> </u>		Tubing Setting Depth: <u> </u>	Tbg setting date: <u> </u>		Packer Depth: <u> </u>
Reason for Non-Production:					
Date formation Abandoned: <u> </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u> </u>		
Bridge Plug Depth: <u> </u>		Sacks cement on top: <u> </u>			

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: _____ JDGarrett@nobleenergyinc.com

Email
:

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: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)