



IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

### CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24	0	834	321	0	834	CALC
1ST	7+7/8	4+1/2	11.6	0	9,177	1,220	2,280	9,177	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	6,721		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,004		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,028		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,100		<input type="checkbox"/>	<input type="checkbox"/>	
D SAND	7,420		<input type="checkbox"/>	<input type="checkbox"/>	
MOWRY	7,493		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,505		<input type="checkbox"/>	<input type="checkbox"/>	
MORRISON	7,750		<input type="checkbox"/>	<input type="checkbox"/>	
LYONS	7,895		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	8,869		<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: Justin Garrett

Title: Regulatory Specialist Date: 1/13/2011 Email: JDGarrett@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400123573	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<u>Other Attachments</u>		
400123562	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400123571	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400123572	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	VERIFIED TOPS WITH JG@NOBLE	2/2/2011 12:25:31 PM
Permit	Requesting tops from optr. Order reported is incorrect.	2/1/2011 8:50:54 AM

Total: 2 comment(s)