


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		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number: <div style="border: 1px solid black; padding: 5px; text-align: center;">400154569</div>	DE	ET	OE	ES
DE	ET	OE	ES				
COMPLETED INTERVAL REPORT							
<p>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.</p>							
1. OGCC Operator Number: <u>100322</u> 2. Name of Operator: <u>NOBLE ENERGY INC</u> 3. Address: <u>1625 BROADWAY STE 2200</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		4. Contact Name: <u>Andrea Rawson</u> Phone: <u>(303) 228-4253</u> Fax: <u>(303) 228-4286</u>					
5. API Number <u>05-123-30885-00</u> 7. Well Name: <u>STROH H</u> 8. Location: QtrQtr: <u>SWNW</u> Section: <u>12</u> Township: <u>3N</u> Range: <u>65W</u> Meridian: <u>6</u> 9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>		6. County: <u>WELD</u> Well Number: <u>12-32</u>					
<u>Completed Interval</u>							
FORMATION: <u>J SAND</u>		Status: <u>PRODUCING</u>					
Treatment Date: <u>02/25/2011</u>		Date of First Production this formation: <u>02/28/2011</u>					
Perforations Top: <u>7591</u> Bottom: <u>7616</u>		No. Holes: <u>48</u> Hole size: _____					
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>					
Frac'd J-Sand w/ 146,985 gals of Slick Water and Silverstim with 282,000#'s of Ottawa sand. J-sand producing through flow plug. Commingled codell, Niobrara, and J-Sand.							
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Test Information:							
Date: <u>03/04/2011</u> Hours: <u>24</u>		Bbls oil: <u>70</u> Mcf Gas: <u>852</u> Bbls H2O: <u>134</u>					
Calculated 24 hour rate:		Bbls oil: <u>70</u> Mcf Gas: <u>852</u> Bbls H2O: <u>134</u> GOR: <u>12171</u>					
Test Method: <u>Flowing</u>		Casing PSI: <u>1250</u> Tubing PSI: <u>0</u> Choke Size: <u>14</u>					
Gas Disposition: <u>SOLD</u>		Gas Type: <u>WET</u> BTU Gas: <u>1210</u> API Gravity Oil: <u>54</u>					
Tubing Size: _____		Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____					
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>							
Date formation Abandoned: _____		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____					
Bridge Plug Depth: _____		Sacks cement on top: _____					

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORMATION: <u>NIOBRARA-CODELL</u>		Status: <u>PRODUCING</u>		
Treatment Date: <u>02/25/2011</u>		Date of First Production this formation: <u>02/28/2011</u>		
Perforations	Top: <u>6824</u>	Bottom: <u>7114</u>	No. Holes: <u>104</u>	Hole size: _____
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>		
<div style="border: 1px solid black; padding: 5px;">Niobrara perms 6824-6891 (48 holes). codell perms 7100-7114 (56 holes). Frac'd Niobrara and Codell w/ 270,940 gals of Slick Water, Silverstim, and 15% HCl with 495,540#s of Ottawa sa Codell producing through flow plug.</div>				
This formation is commingled with another formation:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Test Information:				
Date: <u>03/04/2011</u>	Hours: <u>24</u>	Bbls oil: <u>70</u>	Mcf Gas: <u>852</u>	Bbls H2O: <u>134</u>
Calculated 24 hour rate:		Bbls oil: <u>70</u>	Mcf Gas: <u>852</u>	Bbls H2O: <u>134</u> GOR: <u>12171</u>
Test Method: <u>FLOWING</u>	Casing PSI: <u>1250</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>1210</u>	API Gravity Oil: <u>54</u>	
Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____	
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>				
Date formation Abandoned: _____		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____	
Bridge Plug Depth: _____		Sacks cement on top: _____		

Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.			
Signed: _____		Print Name: <u>Andrea Rawson</u>	
Title: <u>Regulatory Specialist</u>	Date: <u>4/18/2011</u>	Email <u>arawson@nobleenergyinc.com</u>	

Attachment Check List

Att Doc Num	Name
400154569	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)