

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:

400158173

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 4. Contact Name: Justin Garrett
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4449
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
City: DENVER State: CO Zip: 80202

5. API Number 05-123-18232-00 6. County: WELD
7. Well Name: CAVANAGH Well Number: 36-10H6
8. Location: QtrQtr: NWSE Section: 36 Township: 5N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 03/10/2011 Date of First Production this formation: 05/18/1994
Perforations Top: 6822 Bottom: 7143 No. Holes: 191 Hole size:

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

Niobrara and Codell are commingled
Codell 7132'-7145', 57 holes
Codell under sand plug set 7011'-7213' from 2/24/11-3/15/11 for Niobrara refrac
Niobrara 6822'-6958', 134 holes
Frac'd Niobrara w/147271 gals Vistar, Acid, and Slick Water with 248000 lbs Ottawa sand

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 03/25/2011 Hours: 24 Bbls oil: 9 Mcf Gas: 180 Bbls H2O: 12
Calculated 24 hour rate: Bbls oil: 9 Mcf Gas: 180 Bbls H2O: 12 GOR: 20000
Test Method: Flowing Casing PSI: 500 Tubing PSI: 240 Choke Size: 14/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1245 API Gravity Oil: 64
Tubing Size: 2 + 1/16 Tubing Setting Depth: 7123 Tbg setting date: 03/16/2011 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: Justin Garrett

Title: Regulatory Specialist

Date: 4/28/2011

Email: JDGarrett@nobleenergyinc.com

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Attachment Check List

Att Doc Num	Name
400158173	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

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