

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



DE	ET	OE	ES
----	----	----	----

**COMPLETED INTERVAL REPORT**

Document Number:  
400197392

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: <u>100322</u>	4. Contact Name: <u>Justin Garrett</u>
2. Name of Operator: <u>NOBLE ENERGY INC</u>	Phone: <u>(303) 228-4449</u>
3. Address: <u>1625 BROADWAY STE 2200</u>	Fax: <u>(303) 228-4286</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-123-16892-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>KATE WHITE D</u>	Well Number: <u>29-15</u>
8. Location: QtrQtr: <u>SWSE</u> Section: <u>29</u> Township: <u>3N</u> Range: <u>64W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

### Completed Interval

FORMATION: CODELL Status: PRODUCING

Treatment Date: 04/07/2010 Date of First Production this formation: 06/10/1993

Perforations Top: 7057 Bottom: 7069 No. Holes: 81 Hole size: 32/100

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

Codell refrac  
Frac'd Codell W/129128 gals Vistar and Slick Water with 243000 lbs Ottawa sand

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 05/15/2010 Hours: 24 Bbls oil: 10 Mcf Gas: 58 Bbls H2O: 0

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 10 Mcf Gas: 58 Bbls H2O: 0 GOR: 5800

Test Method: Flowing Casing PSI: 180 Tubing PSI: 120 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1306 API Gravity Oil: 52

Tubing Size: 2 + 1/16 Tubing Setting Depth: 7038 Tbg setting date: 04/19/2010 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: SUSSEX Status: SHUT IN

Treatment Date: 03/22/2010 Date of First Production this formation: 08/25/1997

Perforations Top: 4464 Bottom: 4488 No. Holes: 25 Hole size: \_\_\_\_\_

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

Cement squeezed

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: \_\_\_\_\_

Squeezed w/ 150 sxs "G" cement 3/23/10 4446'-4488'

Date formation Abandoned: 03/22/2010 Squeeze:  Yes  No If yes, number of sacks cmt 150

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

**Attachment Check List**

Att Doc Num	Name
400197392	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments**

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

Total: 0 comment(s)