

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400209952

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 05-123-21415-00
6. County: WELD
7. Well Name: KC B
Well Number: 12-15
8. Location: QtrQtr: SWSE Section: 12 Township: 5N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING
Treatment Date: 07/26/2011 Date of First Production this formation: 08/14/2004
Perforations Top: 6416 Bottom: 6718 No. Holes: 248 Hole size:
Provide a brief summary of the formation treatment: Open Hole:
Codell refrac; nothing new happened in Niobrara
Codell 6705'-6718', 56 holes
Frac'd Codell w/129943 gals Vistar and Slick Water with 244760 lbs Ottawa sand
Niobrara 6416'-6612', 192 holes

This formation is commingled with another formation: Yes No

Test Information:
Date: 08/12/2011 Hours: 24 Bbls oil: 10 Mcf Gas: 68 Bbls H2O: 5
Calculated 24 hour rate: Bbls oil: 10 Mcf Gas: 68 Bbls H2O: 5 GOR: 6800
Test Method: Flowing Casing PSI: 550 Tubing PSI: 480 Choke Size: 32/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1336 API Gravity Oil: 57
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6686 Tbg setting date: 07/28/2011 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: 9/29/2011

Email: JDGarrett@nobleenergyinc.com

### **Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
400209952	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>

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