

FORMATION: J SAND Status: PRODUCING

Treatment Date: 06/24/2011 Date of First Production this formation: 08/17/2011
Perforations Top: 7453 Bottom: 7494 No. Holes: 96 Hole size: 0.41

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

Frac'd J-Sand w/146958 gals of Vistar and Slick Water with 281,243#'s of Ottawa sand.

The J-Sand is producing through a Composite Flow Through Plug.

This formation is commingled with another formation: Yes No

Test Information:

Date: 08/26/2011 Hours: 24 Bbls oil: 58 Mcf Gas: 315 Bbls H2O: 19
Calculated 24 hour rate: Bbls oil: 58 Mcf Gas: 315 Bbls H2O: 19 GOR: 5431
Test Method: FLOWING Casing PSI: 960 Tubing PSI: 0 Choke Size: 010/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1359 API Gravity Oil: 50
Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 06/24/2011 Date of First Production this formation: 08/17/2011
Perforations Top: 6759 Bottom: 6996 No. Holes: 96 Hole size: 0

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

Frac'd Niobrara-Codell w/ 268128 glas of Vistar and Slick Water with 501,738#'s of Ottawa sand.

The Codell is producing through a Composite Flow Through Plug.

Commingle the Niobrara and Codell.

This formation is commingled with another formation: Yes No

Test Information:

Date: 08/26/2011 Hours: 24 Bbls oil: 58 Mcf Gas: 315 Bbls H2O: 19
Calculated 24 hour rate: Bbls oil: 58 Mcf Gas: 315 Bbls H2O: 19 GOR: 5431
Test Method: FLOWING Casing PSI: 960 Tubing PSI: 0 Choke Size: 010/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1359 API Gravity Oil: 50
Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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: Eileen Roberts

Title: Regulatory Specialist Date: 9/30/2011 Email : eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name
400210242	FORM 5A SUBMITTED

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User Group **Comment** **Comment Date**

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