

FORM  
5

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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### DRILLING COMPLETION REPORT

Document Number:

400223084

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type  Final completion  Preliminary completion

1. OGCC Operator Number: <u>100322</u>	4. Contact Name: <u>EILEEN ROBERTS</u>
2. Name of Operator: <u>NOBLE ENERGY INC</u>	Phone: <u>(303) 2284330</u>
3. Address: <u>1625 BROADWAY STE 2200</u>	Fax: <u>(303) 2284286</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-123-31178-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>GUTTERSEN STATE CC</u>	Well Number: <u>20-33D</u>
8. Location: QtrQtr: <u>NWSW</u> Section: <u>20</u> Township: <u>4N</u> Range: <u>63W</u> Meridian: <u>6</u>	
Footage at surface: Distance: <u>2077</u> feet Direction: <u>FSL</u> Distance: <u>514</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>40.296150</u> As Drilled Longitude: <u>-104.469220</u>	

GPS Data:  
Date of Measurement: 07/26/2011 PDOP Reading: 2.3 GPS Instrument Operator's Name: Paul Tappy

\*\* If directional footage at Top of Prod. Zone Dist.: 1222 feet. Direction: FSL Dist.: 61 feet. Direction: FEL  
Sec: 19 Twp: 4N Rng: 63W

\*\* If directional footage at Bottom Hole Dist.: 1222 feet. Direction: FSL Dist.: 61 feet. Direction: FEL  
Sec: 19 Twp: 4N Rng: 63W

9. Field Name: <u>WATTENBERG</u>	10. Field Number: <u>90750</u>
11. Federal, Indian or State Lease Number: _____	

12. Spud Date: (when the 1st bit hit the dirt) <u>07/16/2011</u>	13. Date TD: <u>07/19/2011</u>	14. Date Casing Set or D&A: <u>07/20/2011</u>
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15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD <u>7021</u> TVD** <u>6888</u>	17 Plug Back Total Depth MD <u>6972</u> TVD** <u>6839</u>
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18. Elevations GR <u>4712</u> KB <u>4725</u>	One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.
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19. List Electric Logs Run:

CBL/GRL/CCL/VDL, CDL/CNL/ML.

Listed above are the only logs we ran.

20. Casing, Liner and Cement:

**CASING**

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24.00	13	658	243	0	668	
1ST	7+7/8	4+1/2	11.60	13	7,015	560	2,172	7,015	CBL

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

21. Formation log intervals and test zones:

**FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
NIOBRARA	6,554		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,826		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,851		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	6,932		<input type="checkbox"/>	<input type="checkbox"/>	

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: \_\_\_\_\_ Email: eroberts@nobleenergyinc.com

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**General Comments**

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

Total: 0 comment(s)