

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:

400232005

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: Andrea Rawson
2. Name of Operator: NOBLE ENERGY INC	Phone: (303) 228-4253
3. Address: 1625 BROADWAY STE 2200	Fax: (303) 228-4286
City: DENVER State: CO Zip: 80202	

5. API Number 05-123-21515-00	6. County: WELD
7. Well Name: BB DRAW H	Well Number: 8-16
8. Location: QtrQtr: SESE Section: 8 Township: 3N Range: 65W Meridian: 6	
9. Field Name: WATTENBERG	Field Code: 90750

Completed Interval

FORMATION: CODELL	Status: SHUT IN
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Treatment Date: 06/14/2011	Date of First Production this formation:
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Perforations Top: 7296	Bottom: 7309	No. Holes: 52	Hole size:
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Provide a brief summary of the formation treatment: Open Hole: ☐

Codell under sand plug @ 7409.

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

Test Information:

Date:	Hours:	Bbls oil:	Mcf Gas:	Bbls H2O:
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Calculated 24 hour rate:	Bbls oil:	Mcf Gas:	Bbls H2O:	GOR:
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Test Method:	Casing PSI:	Tubing PSI:	Choke Size:
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Gas Disposition:	Gas Type:	BTU Gas:	API Gravity Oil:
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Tubing Size:	Tubing Setting Depth:	Tbg setting date:	Packer Depth:
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Reason for Non-Production:

Will be commingled at a later date.

Date formation Abandoned:	Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt
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Bridge Plug Depth:	Sacks cement on top:
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FORMATION: NIOBRARA	Status: PRODUCING
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Treatment Date: 06/14/2011	Date of First Production this formation: 06/17/2011
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Perforations Top: 7020	Bottom: 7078	No. Holes: 48	Hole size: 0.73
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Provide a brief summary of the formation treatment: Open Hole: ☐

Frac'd Niobrara w/ 170,943 gals of Slick Water, Vistar, and 15% HCl with 246,000#s of Ottawa sand.

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

Test Information:

Date: 06/24/2011	Hours: 24	Bbls oil: 37	Mcf Gas: 374	Bbls H2O: 1
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Calculated 24 hour rate:	Bbls oil: 37	Mcf Gas: 374	Bbls H2O: 1	GOR: 10108
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Test Method: Flowing	Casing PSI: 1100	Tubing PSI: 0	Choke Size: 12
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Gas Disposition: SOLD	Gas Type: WET	BTU Gas: 1115	API Gravity Oil: 62
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Tubing Size:	Tubing Setting Depth:	Tbg setting date:	Packer Depth:
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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: Andrea Rawson

Title: Regulatory Specialist Date: _____ Email: arawson@nobleenergyinc.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)