

**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



DE ET OE ES

Document Number:

400222039

DRILLING COMPLETION REPORT

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: 100322

4. Contact Name: Erin Joseph

2. Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4089

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-123-31832-00

6. County: WELD

7. Well Name: LAZY D ZN

Well Number: 03-09

8. Location: QtrQtr: NWSE Section: 3 Township: 11N Range: 66W Meridian: 6

Footage at surface: Distance: 2639 feet Direction: FSL Distance: 1990 feet Direction: FEL

As Drilled Latitude: 40.949850 As Drilled Longitude: -104.760390

GPS Data:

Date of Measurement: 08/11/2011 PDOP Reading: 1.8 GPS Instrument Operator's Name: Jeffrey jones

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 09/09/2010 13. Date TD: 09/19/2010 14. Date Casing Set or D&A: 09/20/2010

15. Well Classification:

☐ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☒ Observation

16. Total Depth MD 9679 TVD** 17 Plug Back Total Depth MD 9572 TVD**

18. Elevations GR 5894 KB 5910

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

Compensated spectral Natural Gamma

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+1/2	8+5/8	24	0	2,310	760	0	2,310	VISU
1ST	6+1/8	4+1/2	11.6	0	9,615	940	8,140	9,615	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	8,683		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	8,962		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	9,013		<input type="checkbox"/>	<input type="checkbox"/>	
MUDDY J	9,523		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Erin Joseph

Title: Regulatory Analyst II Date: 11/8/2011 Email: ejoseph@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2072783	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400222039	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400222042	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Engineer	CBL emailed over on 1/3/12 confirmed the providing cementing information. CBL will soon be indexed to the well file.	1/4/2012 6:53:06 AM
Permit	REC LOG DOC# 2204900, IN SCANNING	11/16/2011 2:51:50 PM
Permit	REC CMT TKTS, PBTD, CASING AND TD DATES WERE VERIFIED AS OK BY E.J. @NOBLE, WAITING ON LOGS	11/11/2011 10:55:40 AM
Permit	waiting on logs, req cmt tkts & PBTD, req to verify TD and Casing set dates	11/9/2011 11:54:30 AM

Total: 4 comment(s)