

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:

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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 05-123-32259-00 6. County: WELD  
7. Well Name: POWERS Well Number: X22-02  
8. Location: QtrQtr: NWNE Section: 22 Township: 2N Range: 65W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: DAKOTA Status: PRODUCING

Treatment Date: 10/06/2011 Date of First Production this formation: 12/10/2011  
Perforations Top: 7871 Bottom: 7917 No. Holes: 56 Hole size:

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

Frac'd Dakota W/ 39,665 gals of pHaserFrac with 56,800#'s of Ottawa sand.  
Dakota producing through composite flow plug.

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

Test Information:

Date: 12/16/2011 Hours: 24 Bbls oil: 19 Mcf Gas: 315 Bbls H2O: 10  
Calculated 24 hour rate: Bbls oil: 19 Mcf Gas: 315 Bbls H2O: 10 GOR: 16579  
Test Method: Flowing Casing PSI: 175 Tubing PSI: 0 Choke Size: 20  
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1150 API Gravity Oil: 57  
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: J SAND Status: PRODUCING

Treatment Date: 10/06/2011 Date of First Production this formation: 12/10/2011

Perforations Top: 7624 Bottom: 7636 No. Holes: 48 Hole size:

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

Frac'd J-Sand with 149,562 gals of Silverstim with 279,450#'s of Ottawa sand.  
J-Sand producing through composite flow plug.

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

**Test Information:**

Date: 12/16/2011 Hours: 24 Bbls oil: 19 Mcf Gas: 315 Bbls H2O: 10

Calculated 24 hour rate:  Bbls oil: 19 Mcf Gas: 315 Bbls H2O: 10 GOR: 16579

Test Method: Flowing Casing PSI: 175 Tubing PSI: 0 Choke Size: 20

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1150 API Gravity Oil: 57

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: 10/06/2011 Date of First Production this formation: 12/10/2011

Perforations Top: 7029 Bottom: 7191 No. Holes: 88 Hole size:

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

Niobrara perms 7029-7045 (32 holes), Codell perms 7177-7191 (56 holes).  
Frac'd Niobrara / Codell with 272,912 gals of Silverstim with 487,750#'s of Ottawa sand.  
Codell producing through composite flow plug.  
Commingle Codell and Niobrara.

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

**Test Information:**

Date: 12/16/2011 Hours: 24 Bbls oil: 19 Mcf Gas: 315 Bbls H2O: 10

Calculated 24 hour rate:  Bbls oil: 19 Mcf Gas: 315 Bbls H2O: 10 GOR: 16579

Test Method: Flowing Casing PSI: 175 Tubing PSI: 0 Choke Size: 20

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1150 API Gravity Oil: 57

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: Andrea Rawson

Title: Regulatory Specialist Date:  arawson@nobleenergyinc.com

Email  
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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**

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

Total: 0 comment(s)