

FORM  
5A

Rev  
02/08

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400254010

Date Received:

02/22/2012

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  
2. Name of Operator: NOBLE ENERGY INC  
3. Address: 1625 BROADWAY STE 2200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Eileen Roberts  
Phone: (303) 2284330  
Fax: (303) 2284286

5. API Number 05-123-33567-00  
6. County: WELD  
7. Well Name: STREAR  
Well Number: V03-73HN  
8. Location: QtrQtr: SESE Section: 3 Township: 2N Range: 67W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 10/17/2011 Date of First Production this formation: 11/01/2011  
Perforations Top: 7632 Bottom: 11305 No. Holes: 0 Hole size: 0

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

Frac'd the Niobrara w/ 1475728 gals of Vistar and Slick Water with 206,326.0#'s of Ottawa sand.

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

Test Information:

Date: 11/11/2011 Hours: 24 Bbls oil: 469 Mcf Gas: 1081 Bbls H2O: 84  
Calculated 24 hour rate: Bbls oil: 469 Mcf Gas: 1081 Bbls H2O: 84 GOR: 2304  
Test Method: FLOWING Casing PSI: 1946 Tubing PSI: 1381 Choke Size: 16/64  
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1247 API Gravity Oil: 53  
Tubing Size: 2 + 7/8 Tubing Setting Depth: 7699 Tbg setting date: 11/01/2011 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: 2/22/2012 Email: eroberts@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Name
400254010	FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	added The tubing info for the subject well: Size: 2 7/8, Depth: 7699, Date: 11/1/2011 per operator.	4/27/2012 3:49:39 PM
Permit	ON HOLD: Requesting tubing info & WBD.	4/18/2012 1:42:36 PM

Total: 2 comment(s)