

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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Date Received:

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: Tania McNutt
 2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4392
 3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
 City: DENVER State: CO Zip: 80202

5. API Number 05-123-32944-00 6. County: WELD
 7. Well Name: Pettinger Well Number: AB27-01
 8. Location: QtrQtr: NENE Section: 27 Township: 7N Range: 64W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 01/03/2012 Date of First Production this formation: 02/02/2012

Perforations Top: 6773 Bottom: 7073 No. Holes: 96 Hole size: _____

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

Pumped 483,591 lbs of Ottawa Proppant and 266,654 gallons of 15% HCL, Slick Water and Silverstim.

This formation is commingled with another formation: Yes No

Test Information:

Date: 02/09/2012 Hours: 24 Bbls oil: 19 Mcf Gas: 7 Bbls H2O: 7

Calculated 24 hour rate: _____ Bbls oil: 19 Mcf Gas: 7 Bbls H2O: 7 GOR: 368

Test Method: FLOWING Casing PSI: 1561 Tubing PSI: 185 Choke Size: 22/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1252 API Gravity Oil: 39

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7044 Tbg setting date: 01/18/2012 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: Tania McNutt

Title: Regulatory Analyst Date: _____ Email: tmcnutt@nobleenergyinc.com

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)