

FORM  
5A

Rev  
06/12

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:

400265007

Date Received:

03/27/2012

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: Liz Lindow  
Phone: (303) 228-4342  
Fax: (303) 228-4286

5. API Number 05-125-12022-00  
6. County: YUMA  
7. Well Name: Unger  
Well Number: 24-11  
8. Location: QtrQtr: SESW Section: 11 Township: 1N Range: 46W Meridian: 6  
9. Field Name: Field Code:

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type:  
Treatment Date: 11/21/2011 End Date: Date of First Production this formation: 12/12/2011  
Perforations Top: 2460 Bottom: 2500 No. Holes: 120 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

29572 gal MAV-100; 50060 lbs Texas Gold proppant; 50020 Daniels sand proppant

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

Total fluid used in treatment (bbl):

Max pressure during treatment (psi):

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal):

Type of gas used in treatment:

Number of staged intervals:

Total acid used in treatment (bbl):

Max frac gradient (psi/ft):

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl):

Fresh water used in treatment (bbl):

Disposition method for flowback:

Total proppant used (lbs):

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/12/2011 Hours: 24 Bbl oil: 0 Mcf Gas: 74 Bbl H2O: 0  
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 74 Bbl H2O: 0 GOR:  
Test Method: Flowing Casing PSI: 462 Tubing PSI: 0 Choke Size:  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1000 API Gravity Oil: 0  
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: Liz Lindow

Title: Regulatory Analyst Date: 3/27/2012 Email: llindow@nobleenergyinc.com  
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### **Attachment Check List**

| Att Doc Num | Name              |
|-------------|-------------------|
| 400265007   | FORM 5A SUBMITTED |

Total Attach: 1 Files

### **General Comments**

| <b><u>User Group</u></b> | <b><u>Comment</u></b>                                 | <b><u>Comment Date</u></b> |
|--------------------------|---|----------------------------|
| Permit                   | Logs rcd 5/9/2012                                     | 6/4/2012<br>11:33:44 AM    |
| Permit                   | Email to opr re paper triple combo log. 4/30/2012 NKP | 4/30/2012<br>4:32:41 PM    |

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