

FORM
5

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



DE ET OE ES

Document Number:

2609841

Date Received:

12/04/2009

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
2. Name of Operator: NOBLE ENERGY INC
3. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202
4. Contact Name: ANDREA RAWSON
Phone: (281) 876-6105
Fax: (281) 876-2503

5. API Number 05-123-29764-00
6. County: WELD
7. Well Name: VYNCKIER V Well Number: 11-22
8. Location: QtrQtr: SWNE Section: 11 Township: 2N Range: 67W Meridian: 6
Footage at surface: Distance: 2512 feet Direction: FNL Distance: 1412 feet Direction: FEL
As Drilled Latitude: 40.152874 As Drilled Longitude: -104.853558

GPS Data:

Data of Measurement: 09/03/2009 PDOP Reading: 2.5 GPS Instrument Operator's Name: BRIAN DEROSE

** 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: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 07/28/2009 13. Date TD: 08/02/2009 14. Date Casing Set or D&A: 08/02/2009

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 8069 TVD** 17 Plug Back Total Depth MD 8015 TVD**

18. Elevations GR 4881 KB 4894

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:

CBL/GR/CCL, DSN/SD/AC/TR

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+1/4	8+5/8		0	676	263	0	676	CALC
1ST	7+7/8	4+1/2		0	8,059	1,065	6,495	8,059	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	1ST	6,060		498	6,105

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	7,088		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,352		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,373		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,462		<input type="checkbox"/>	<input type="checkbox"/>	
D SAND	7,749		<input type="checkbox"/>	<input type="checkbox"/>	
MOWRY	7,799		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,812		<input type="checkbox"/>	<input type="checkbox"/>	
J-3 SAND	7,835		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: Y _____ Print Name: ANDREA RAWSON _____

Title: REGULATORY SPECIALIST Date: 11/3/2009 Email: ARAWSOME@NOBLEENERGYINC.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" 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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Engineer	Emailed operator for cement tickets for cement through DV tool.	7/10/2012 1:34:03 PM

Total: 1 comment(s)