

**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:

400314831

Date Received:

08/15/2012

**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

4. Contact Name: Sarah Finnegan

2. Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2265

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-123-35040-00

6. County: WELD

7. Well Name: REI H

Well Number: 09-24D

8. Location: QtrQtr: SENW Section: 9 Township: 3N Range: 65W Meridian: 6

Footage at surface: Distance: 1460 feet Direction: FNL Distance: 1421 feet Direction: FWL

As Drilled Latitude: 40.243130 As Drilled Longitude: -104.672630

## GPS Data:

Data of Measurement: 05/21/2012 PDOP Reading: 3.1 GPS Instrument Operator's Name: Paul Tappy

\*\* If directional footage at Top of Prod. Zone Dist.: 1346 feet. Direction: FSL Dist.: 2501 feet. Direction: FWL

Sec: 9 Twp: 3N Rng: 65W

\*\* If directional footage at Bottom Hole Dist.: 1297 feet. Direction: FSL Dist.: 2493 feet. Direction: FWL

Sec: 9 Twp: 3N Rng: 65W

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) 04/23/2012 13. Date TD: 04/27/2012 14. Date Casing Set or D&amp;A: 04/28/2012

## 15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 8435 TVD\*\* 7801 17 Plug Back Total Depth MD 8382 TVD\*\* 7748

18. Elevations GR 4829 KB 4842

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, Triple Combo

## 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	24.00	0	744	279	0	754	CALC
1ST	7+7/8	4+1/2	11.60	0	8,427	725	1,372	8,435	CBL

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: _____					
Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
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	
PIERRE	2,976		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	4,114		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,806		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,405		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,494		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,780		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,800		<input type="checkbox"/>	<input type="checkbox"/>	
D SAND	8,191		<input type="checkbox"/>	<input type="checkbox"/>	
MOWRY	8,234		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,247		<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: \_\_\_\_\_ Print Name: Sarah Finnegan

Title: Regulatory Analyst Date: 8/15/2012 Email: sfinnegan@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400315897	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400314853	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400314831	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400314849	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400314850	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400314851	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)