

**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:
400351969

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
2. Name of Operator: NOBLE ENERGY INC
3. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202
4. Contact Name: JEAN MUSE-REYNOLDS
Phone: (303) 228-4316
Fax: (303) 228-4286

5. API Number 05-123-35272-00
6. County: WELD
7. Well Name: Ulrich PC
Well Number: G21-17D
8. Location: QtrQtr: SWNE Section: 21 Township: 4N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/21/2012 End Date: 09/21/2012 Date of First Production this formation: 09/26/2012

Perforations Top: 7330 Bottom: 7344 No. Holes: 56 Hole size: 0.4

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

CODELL IS PRODUCING THROUGH COMPOSITE FLOW-THROUGH PLUG

PUMPED 243870# OTTAWA SAND DOWNHOLE in 123906gals of 15% HCL/Clearstar/GELLED/SLICK/RECYCLED/FRESH WATER

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 2950 Max pressure during treatment (psi): 5250

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.68

Total acid used in treatment (bbl): 12 Number of staged intervals: 7

Recycled water used in treatment (bbl): 251 Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): 2687 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 243870 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

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: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: 09/26/2012

Perforations Top: 7036 Bottom: 7344 No. Holes: 104 Hole size: 0.4

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

CODELL IS PRODUCING THROUGH COMPOSITE FLOW-THROUGH PLUG

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: _____ Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____ Number of staged intervals: _____

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: 10/02/2012 Hours: 2 Bbl oil: 60 Mcf Gas: 130 Bbl H2O: 22

Calculated 24 hour rate: Bbl oil: 60 Mcf Gas: 130 Bbl H2O: 22 GOR: 2317

Test Method: FLOWING Casing PSI: 250 Tubing PSI: 0 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1305 API Gravity Oil: 66

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: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/21/2012 End Date: 09/21/2012 Date of First Production this formation: 09/25/2012
Perforations Top: 7036 Bottom: 7144 No. Holes: 48 Hole size: 0.72

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

CODELL IS PRODUCING THROUGH COMPOSITE FLOW-THROUGH PLUG
PUMPED 252371# OTTAWA SAND DOWNHOLE in 165253gals of Clearstar/GELLED/SLICK/RECYCLED/FRESH WATER

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 3935 Max pressure during treatment (psi): 5663
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment: Min frac gradient (psi/ft): 0.91
Total acid used in treatment (bbl): 0 Number of staged intervals: 7
Recycled water used in treatment (bbl): 272 Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): 3663 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 252371 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: Hours: Bbl oil: Mcf Gas: Bbl H2O:
Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR:
Test Method: Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: Gas Type: Btu Gas: API Gravity Oil:
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: ** Wireline and Cement Job Summary must be attached.

Comment:
CODELL IS PRODUCING THROUGH COMPOSITE FLOW-THROUGH PLUG

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: Print Name: JEAN MUSE-REYNOLDS
Title: REGULATORY COMPLIANCE Date: Email jmuse@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)