

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:

400347094

Date Received:

11/15/2012

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  
2. Name of Operator: NOBLE ENERGY INC  
3. Address: 1625 BROADWAY STE 2200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: EILEEN ROBERTS  
Phone: (303) 2284330  
Fax: (303) 2284286

5. API Number 05-123-33305-00  
6. County: WELD  
7. Well Name: TIMBRO PC Well Number: LD16-17  
8. Location: QtrQtr: SENE Section: 16 Township: 9N Range: 58W Meridian: 6  
Footage at surface: Distance: 1846 feet Direction: FNL Distance: 1200 feet Direction: FEL  
As Drilled Latitude: 40.753520 As Drilled Longitude: -103.864090

GPS Data:

Data of Measurement: 05/26/2011 PDOP Reading: 5.0 GPS Instrument Operator's Name: Paul Tappy

\*\* 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: WILDCAT 10. Field Number: 99999

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 05/02/2011 13. Date TD: 05/09/2011 14. Date Casing Set or D&A: 05/11/2011

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 6659 TVD\*\* 17 Plug Back Total Depth MD 6592 TVD\*\*

18. Elevations GR 4775 KB 4790

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:

GRL/CCL/CBL/VDL, ACL/TRL/SDL/DSNL, CSL/NGR.

No other logs sent at this time.

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	1,166	440	0	1,178	CALC
1ST	7+7/8	4+1/2	11.60	0	6,636	600	1,220	6,636	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	
SUSSEX	3,886		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,131		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	5,603		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	5,892		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	5,915		<input type="checkbox"/>	<input type="checkbox"/>	Well shut in at this time no form 5a,10 no perf or frac.

Comment:

Well shut in no Perf or Frac. No form 5a or 10 at this time.

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

Signed: \_\_\_\_\_ Print Name: Eileen Roberts

Title: Regulatory Specialist Date: 11/15/2012 Email: eroberts@nobleenergyinc.com

#### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400347377	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
2233843	Core Analysis	Yes <input checked="" type="checkbox"/>	No <input 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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
400347094	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400347375	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

#### General Comments

User Group	Comment	Comment Date
Permit	Off hold. Attached core analysis per operator.	1/11/2013 1:44:19 PM
Permit	On Hold. Requested core analysis.	11/20/2012 3:59:32 PM

Total: 2 comment(s)