

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400351969

Date Received:

12/28/2012

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: JEAN MUSE-REYNOLDS

Phone: (303) 228-4316

Fax: (303) 228-4286

5. API Number 05-123-35272-00

7. Well Name: Ulrich PC

8. Location: QtrQtr: SWNE

Section: 21

Township: 4N

Range: 65W

Meridian: 6

9. Field Name: WATTENBERG

Field Code: 90750

6. County: WELD

Well Number: G21-17D

Completed Interval

FORMATION: <u>CODELL</u>		Status: <u>COMMINGLED</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>09/21/2012</u>		End Date: <u>09/21/2012</u>		Date of First Production this formation: <u>09/26/2012</u>	
Perforations	Top: <u>7330</u>	Bottom: <u>7344</u>	No. Holes: <u>56</u>	Hole size: <u>0.4</u>	

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): <u>2950</u>	Max pressure during treatment (psi): <u>5250</u>
Total gas used in treatment (mcf): <u>0</u>	Fluid density at initial fracture (lbs/gal): <u>8.34</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.68</u>
Total acid used in treatment (bbl): <u>12</u>	Number of staged intervals: <u>7</u>
Recycled water used in treatment (bbl): <u>251</u>	Flowback volume recovered (bbl): <u>210</u>
Fresh water used in treatment (bbl): <u>2687</u>	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>243870</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

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: 2167
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: 09/16/2012 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): 210

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: 12/28/2012 Email: jmuse@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name
400351969	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Received info. Split flowback volume between the two zones. Ready to pass.	2/13/2013 7:47:16 AM
Permit	On hold for flowback volume.	2/8/2013 2:36:48 PM

Total: 2 comment(s)