

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:  
400419029

Date Received:

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: Kathleen Mills  
Phone: (720) 587-2226  
Fax: (303) 228-4286

5. API Number 05-123-35633-00  
6. County: WELD  
7. Well Name: WELLS RANCH Well Number: AA12-67-1HN  
8. Location: QtrQtr: NENE Section: 12 Township: 6N Range: 63W Meridian: 6  
Footage at surface: Distance: 922 feet Direction: FNL Distance: 217 feet Direction: FEL  
As Drilled Latitude: 40.505870 As Drilled Longitude: -104.375700

GPS Data:  
Date of Measurement: 10/18/2012 PDOP Reading: 2.9 GPS Instrument Operator's Name: PAUL TAPPY

\*\* If directional footage at Top of Prod. Zone Dist.: 1678 feet. Direction: FNL Dist.: 804 feet. Direction: FEL  
Sec: 12 Twp: 6N Rng: 63W  
\*\* If directional footage at Bottom Hole Dist.: 1661 feet. Direction: FNL Dist.: 602 feet. Direction: FWL  
Sec: 12 Twp: 6N Rng: 63W

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) 09/28/2012 13. Date TD: 10/04/2012 14. Date Casing Set or D&A: 10/05/2012

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 11354 TVD\*\* 6700 17 Plug Back Total Depth MD 11343 TVD\*\* 6689

18. Elevations GR 4893 KB 4917  
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, MWD/GR, MUD-HZ-MUD VERT

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
CONDUCTOR	24	16	42.09	0	124	80	0	124	VISU
SURF	13+3/4	9+5/8	36	0	672	357	0	672	VISU
1ST	8+3/4	7	26	0	7,178	675	1,395	7,178	CALC
1ST LINER	6+1/8	4+1/2	11.6	1035	11,344	0			

**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	2,488		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,782		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,452		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,860		<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES	6,299		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,986		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

This well experienced steering problems @ 8920', problem corrected, Steve Freese @ COGCC was contacted with the details.

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

Signed: \_\_\_\_\_ Print Name: Kathleen Mills

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: kmills@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400419085	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400419088	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"/>
<b>Other Attachments</b>			
400419068	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419073	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419079	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419083	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419084	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400419089	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

#### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)