

FORM  
5Rev  
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:

400420865

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

4. Contact Name: JEAN MUSE-REYNOLDS

2. Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4316

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-123-35625-00

6. County: WELD

7. Well Name: ADAMS D

Well Number: 30-29D

8. Location: QtrQtr: NENW Section: 30 Township: 3N Range: 64W Meridian: 6

Footage at surface: Distance: 154 feet Direction: FNL Distance: 2093 feet Direction: FWL

As Drilled Latitude: 40.203000 As Drilled Longitude: -104.595260

## GPS Data:

Data of Measurement: 08/13/2012 PDOP Reading: 3.4 GPS Instrument Operator's Name: PAUL TAPPY

\*\* If directional footage at Top of Prod. Zone Dist.: 63 feet. Direction: FNL Dist.: 1271 feet. Direction: FWL

Sec: 30 Twp: 3N Rng: 64W

\*\* If directional footage at Bottom Hole Dist.: 65 feet. Direction: FNL Dist.: 1269 feet. Direction: FWL

Sec: 30 Twp: 3N Rng: 64W

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) 07/24/2012 13. Date TD: 07/26/2012 14. Date Casing Set or D&amp;A: 07/24/2012

## 15. Well Classification:

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

16. Total Depth MD 7299 TVD\*\* 7218 17 Plug Back Total Depth MD 7222 TVD\*\* 7140

18. Elevations GR 4782 KB 4796

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	26	14	758	307	0	758	VISU
1ST	7+7/8	4+1/2	11.6	14	7,289	580	2,145	7,289	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:

<b>FORMATION LOG INTERVALS AND TEST ZONES</b>					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PIERRE	2,873		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,800		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,382		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,004		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,854		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,080		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,103		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FLOWBACK VOLUMES REPORTED ON NIOBRARA PANEL  
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	Document Name	attached ?
<b>Attachment Checklist</b>		
400421510	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400420909	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>		
400420897	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400420899	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400420900	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400420902	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400420912	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)