

FORM
5ARev
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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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: Julie Webb
 Phone: (720) 587-2316
 Fax:

5. API Number 05-121-06991-00
 6. County: WASHINGTON
 7. Well Name: G O YEAMANS
 Well Number: 1
 8. Location: QtrQtr: SENW Section: 15 Township: 2N Range: 52W Meridian: 6
 9. Field Name: SURVEYOR CREEK Field Code: 80300

Completed Interval

FORMATION: D SAND Status: PLUGGED AND ABANDONED Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/25/1957 End Date: 03/25/1957 Date of First Production this formation: 03/27/1957

Perforations Top: 4592 Bottom: 4808 No. Holes: 28 Hole size:

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

8000 GAL 8000# SAND FRAC

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: 04/01/1957 Hours: 48 Bbl oil: 122 Mcf Gas: 500 Bbl H2O: 25
 Calculated 24 hour rate: Bbl oil: 122 Mcf Gas: 500 Bbl H2O: 25 GOR: 4098
 Test Method: Flowing Casing PSI: 320 Tubing PSI: 0 Choke Size: 32/64
 Gas Disposition: SOLD Gas Type: WET Btu Gas: API Gravity Oil: 0
 Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production: Found holes in casing 4235'-4266' & 2025'-2056' Decided to plug well.

Date formation Abandoned: 01/24/2008 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt

** Bridge Plug Depth: 2056 ** Sacks cement on top: 35 ** Wireline and Cement Job Summary must be attached.

Comment:

Cement Plug set 120-370'; pumped 20 sks @2056' Cement Plug 1868-2056'; pumped 15 sks cement plug at 2056'.

Cement ticket and wireline not available. Plug was set in 2003 by Walsh Production.

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

Signed: _____ Print Name: Julie Webb

Title: Regulatory Analyst Date: _____ Email juliewebb@nobleenergyinc.com
:

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)