

**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:

400456817

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: Kathleen Mills

2. Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2226

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-123-36284-00

6. County: WELD

7. Well Name: KNAUB PC G

Well Number: 04-67-1HN

8. Location: QtrQtr: NWSW Section: 4 Township: 4N Range: 65W Meridian: 6

Footage at surface: Distance: 2321 feet Direction: FSL Distance: 287 feet Direction: FWL

As Drilled Latitude: 40.340740 As Drilled Longitude: -104.676693

## GPS Data:

Data of Measurement: 04/19/2013 PDOP Reading: 4.3 GPS Instrument Operator's Name: BRANDI BINGHAM

\*\* If directional footage at Top of Prod. Zone Dist.: 1457 feet. Direction: FNL Dist.: 1039 feet. Direction: FWL

Sec: 4 Twp: 4N Rng: 65W

\*\* If directional footage at Bottom Hole Dist.: 1636 feet. Direction: FNL Dist.: 535 feet. Direction: FEL

Sec: 4 Twp: 4N Rng: 65W

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) 02/09/2013 13. Date TD: 03/15/2013 14. Date Casing Set or D&amp;A: 03/16/2013

## 15. Well Classification:

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

16. Total Depth MD 11321 TVD\*\* 6911 17 Plug Back Total Depth MD 11305 TVD\*\* 6911

18. Elevations GR 4678 KB 4708

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, MUD, GR

## 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	26	16	42.05	0	130	160	0	130	VISU
SURF	13+3/4	9+5/8	36	0	637	350	0	637	VISU
1ST	8+3/4	7	26	0	7,502	650	1,228	7,502	CALC
1ST LINER	6+1/8	4+1/2	11.6	7367	11,306	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	2,528		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,744		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,412		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,037		<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES	6,315		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,075		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

TYPO ERROR ON APD PLAT ELEVATION - IT SHOULD READ 4678', NOT 4618'

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 ?
<u>Attachment Checklist</u>		
400456835	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400456837	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"/>
<u>Other Attachments</u>		
400456827	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400456828	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400456830	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400456831	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400456832	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400456833	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400456838	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400460517	PDF-CEMENT BOND	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)