

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



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Document Number:

400515304

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

5. API Number 05-123-23334-00  
6. County: WELD  
7. Well Name: Fabrizius  
Well Number: 01-28  
8. Location: QtrQtr: NENE Section: 28 Township: 11N Range: 61W Meridian: 6  
9. Field Name: GROVER Field Code: 33380

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/03/2012 End Date: 05/03/2012 Date of First Production this formation: 05/11/2012

Perforations Top: 7050 Bottom: 7062 No. Holes: 72 Hole size: 0.43

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

FRAC'D W/ 127613 GAL VISTAR AND SLICK WATER, 500 GAL 15% HCL, 11520# SUPER LC AND 234140# OTTAWA SAND

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 3038 Max pressure during treatment (psi): 3199

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: Min frac gradient (psi/ft): 0.79

Total acid used in treatment (bbl): Number of staged intervals: 9

Recycled water used in treatment (bbl): 265 Flowback volume recovered (bbl): 841

Fresh water used in treatment (bbl): 2773 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 245660 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.

FORMATION: <u>J SAND</u>		Status: <u>PRODUCING</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>04/19/2012</u>		End Date: <u>04/19/2012</u>		Date of First Production this formation: <u>10/15/2006</u>	
Perforations	Top: <u>7612</u>	Bottom: <u>7620</u>	No. Holes: <u>32</u>	Hole size: <u>0.41</u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
FRAC'D W/84500 GAL VISTAR AND SLICK WATER, 9097# SB EXCEL AND 139097# OTTAWA SAND. 4/5/2012 SET CFP@7641					
This formation is commingled with another formation:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Total fluid used in treatment (bbl): <u>2012</u>			Max pressure during treatment (psi): <u>4440</u>		
Total gas used in treatment (mcf): _____			Fluid density at initial fracture (lbs/gal): <u>8.34</u>		
Type of gas used in treatment: _____			Min frac gradient (psi/ft): <u>0.73</u>		
Total acid used in treatment (bbl): _____			Number of staged intervals: <u>9</u>		
Recycled water used in treatment (bbl): <u>160</u>			Flowback volume recovered (bbl): <u>841</u>		
Fresh water used in treatment (bbl): <u>1852</u>			Disposition method for flowback: <u>RECYCLE</u>		
Total proppant used (lbs): <u>148194</u>			Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>		
Reason why green completion not utilized: _____					
<b>Fracture stimulations must be reported on FracFocus.org</b>					
<b>Test Information:</b>					
Date: <u>05/16/2012</u>	Hours: <u>24</u>	Bbl oil: <u>12</u>	Mcf Gas: <u>10</u>	Bbl H2O: <u>106</u>	
Calculated 24 hour rate:	Bbl oil: <u>12</u>	Mcf Gas: <u>10</u>	Bbl H2O: <u>106</u>	GOR: <u>833</u>	
Test Method: <u>FLOWING</u>	Casing PSI: <u>250</u>	Tubing PSI: <u>68</u>	Choke Size: <u>12/64</u>		
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	Btu Gas: <u>1548</u>	API Gravity Oil: <u>42</u>		
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>6797</u>	Tbg setting date: <u>05/11/2012</u>	Packer Depth: _____		
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
Date formation Abandoned: _____		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____		
** Bridge Plug Depth: <u>7641</u>		** 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: 05/11/2012  
Perforations Top: 6811 Bottom: 7062 No. Holes: 104 Hole size: \_\_\_\_\_  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

COMMINGLE NB & CD

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: 05/16/2012 Hours: 24 Bbl oil: 12 Mcf Gas: 10 Bbl H2O: 106  
Calculated 24 hour rate: Bbl oil: 12 Mcf Gas: 10 Bbl H2O: 106 GOR: 833  
Test Method: FLOWING Casing PSI: 250 Tubing PSI: 68 Choke Size: 12/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1548 API Gravity Oil: 42  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6797 Tbg setting date: 05/11/2012 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: 05/03/2012 End Date: 05/03/2012 Date of First Production this formation: 05/11/2012  
Perforations Top: 6811 Bottom: 6860 No. Holes: 32 Hole size: 0.71  
Provide a brief summary of the formation treatment: Open Hole: ☐

PERF'D 6811-6815', 6848-6860', FRAC'D W/ 167323 GAL VISTAR AND SLICK WATER, 1118# SUPER LC AND 237481# OTTAWA SAND

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 3984 Max pressure during treatment (psi): 4107  
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.34  
Type of gas used in treatment: Min frac gradient (psi/ft): 0.81  
Total acid used in treatment (bbl): Number of staged intervals: 8  
Recycled water used in treatment (bbl): 268 Flowback volume recovered (bbl): 841  
Fresh water used in treatment (bbl): 3716 Disposition method for flowback: RECYCLE  
Total proppant used (lbs): 248499 Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

Fracture stimulations must be reported on [FracFocus.org](http://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:

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	Name
400515401	OTHER

Total Attach: 1 Files

#### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)