

FORM
23

Rev
12/13

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

Accident Tracking No.:

400562068

WELL CONTROL REPORT

As required by Rule 327.

CONTACT INFORMATION

☒ Initial Notice of Well Control Event

1. OGCC Operator Number: 100322 4 Contact Name: Justin Garrett
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228 4449
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228 4286
City: DENVER State: CO Zip: 80202 Email: JDGarrett@nobleenergyinc.com

WELL INFORMATION

5. API Number: 05- 123-38195 6. County: WELD
7. Well Name: OSCAR Y 8. Welly Number: 10-76-1HN
9. Unit Name: _____ 10. Unit Number: _____
11. Location: QTRQTR: NESW Sec: 10 Twp: 2N Rng: 64W Meridian: 6
Lat: _____ Long: _____
12. Footage from Exterior Section Lines: Distance: _____ feet, Direction: _____ Distance: _____ feet, Direction: _____
13. Field Name: WATTENBERG 14. Field Number: 90750

CURRENT WELLBORE INFORMATION

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status

WELL CONTROL INFORMATION

17. Type of Well Control: Drilling
18. True Vertical Depth at Well Control Event: 9785 feet.
19. Formation at Well Control Event: NIOBRARA
20. Formation Code: NBRR
21. Shut-in Drill Pipe Pressure (SIDPP): 344 psi.
22. Shut-in Casing Pressure (SICP): 301 psi.
23. Mud Weight at Time of Well Control Events: 9.6 ppg.
24. Pit Gain: 10 lbs.
25. Time Shut-in: 1:30 AM Date Shut-in: 02/25/2014
26. Mud Weight Required for Well Control: 10.8 ppg.
27. Fluid Type of In-Flow: Gas

28. Comments (describe actions taken to provide well control in detail):

Precision 828 experienced a gas kick while drilling the lateral section and well had to be shut in on 2/25/14 @ 01:30hrs on the Oscar Y10-76-1HN. Gas was circulated out and well was killed on 2/25/14 @ 17:00hrs. Kick took a 10.8ppg kill weight mud. The field inspector, Jim Precup, voice mail was full and so was unable to leave message. I left a voice message with the area engineer, Diana Burn with the COGCC.

OPERATOR COMMENTS and SUBMITTAL

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This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Justin Garrett Email: JDGarrett@nobleenergyinc.com
Signature: _____ Title: Regulatory Analyst Date: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

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General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)

Attachment Check List

Att Doc Num

Name

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Total Attach: 0 Files