

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	20	14	113	0	124	72	0	124	VISU
SURF	13+3/4	9+5/8	36	0	625	370	0	625	VISU
1ST	8+3/4	7	26	0	6,971	590	1,146	6,971	CBL
1ST LINER	6+1/8	4+1/2	11.6	6872	11,391	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	2,395		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,550		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,079		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,907		<input type="checkbox"/>	<input type="checkbox"/>	
TEEPEE BUTTES	5,930		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,767		<input type="checkbox"/>	<input type="checkbox"/>	

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	Document Name	attached ?	
Attachment Checklist			
400586180	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400586181	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"/>
Other Attachments			
400586161	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400586169	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400586170	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400586173	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400586176	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400586177	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400586178	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400586186	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)