

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:

400600169

Date Received:

05/01/2014

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: <u>100322</u>	4. Contact Name: <u>Eileen Roberts</u>
2. Name of Operator: <u>NOBLE ENERGY INC</u>	Phone: <u>(303) 2284330</u>
3. Address: <u>1625 BROADWAY STE 2200</u>	Fax: <u>(303) 2284286</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>eroberts@nobleenergyinc.com</u>

5. API Number <u>05-123-36701-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>SHABLE USX PC AB</u>	Well Number: <u>11-63-1HNL</u>
8. Location: QtrQtr: <u>SWSW</u> Section: <u>11</u> Township: <u>7N</u> Range: <u>64W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: NIOBRARA Status: SHUT IN Treatment Type: FRACTURE STIMULATION

Treatment Date: 08/26/2013 End Date: 08/26/2013 Date of First Production this formation: _____

Perforations Top: 15757 Bottom: 16325 No. Holes: 0 Hole size: _____

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

2 stages: Frac'd the Niobrara w/ 314869 gals of Vistar and Slick Water with 298885#'s of Ottawa sand.
Well shut in no test data.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 7496 Max pressure during treatment (psi): 7988

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.43

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

Total acid used in treatment (bbl): 0 Number of staged intervals: 2

Recycled water used in treatment (bbl): 325 Flowback volume recovered (bbl): 0

Fresh water used in treatment (bbl): 7171 Disposition method for flowback: _____

Total proppant used (lbs): 298885 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.

Comment: _____

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

Signed: _____ Print Name: Eileen Roberts

Title: Regulatory Specialist Date: 5/1/2014 Email: eroberts@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name
400600169	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	COGCC req'd this 5A in order to process a NOI.	5/2/2014 7:25:46 AM

Total: 1 comment(s)