

**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.

Document Number:  
400709182

Date Received:

Completion Type  Final completion  Preliminary completion

OGCC Operator Number: 100322 Contact Name: EILEEN ROBERTS

Name of Operator: NOBLE ENERGY INC Phone: (303) 2284330

Address: 1625 BROADWAY STE 2200 Fax: (303) 2284286

City: DENVER State: CO Zip: 80202

API Number 05-123-38682-00 County: WELD

Well Name: Wells Ranch Well Number: AE30-63HNC

Location: QtrQtr: SWSW Section: 29 Township: 6N Range: 62W Meridian: 6

Footage at surface: Distance: 1048 feet Direction: FSL Distance: 65 feet Direction: FWL

As Drilled Latitude: 40.453298 As Drilled Longitude: -104.356239

GPS Data:  
Date of Measurement: 03/22/2014 PDOP Reading: 5.0 GPS Instrument Operator's Name: Riley Jonsson

\*\* If directional footage at Top of Prod. Zone Dist.: 1216 feet. Direction: FSL Dist.: 758 feet. Direction: FEL  
Sec: 30 Twp: 6N Rng: 62W

\*\* If directional footage at Bottom Hole Dist.: 1338 feet. Direction: FSL Dist.: 384 feet. Direction: FEL  
Sec: 25 Twp: 6N Rng: 63W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 05/29/2014 Date TD: 06/06/2014 Date Casing Set or D&A: 06/08/2014

Rig Release Date: 06/09/2014 Per Rule 308A.b.

Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD 12007 TVD\*\* 6628 Plug Back Total Depth MD 11988 TVD\*\* 6628

Elevations GR 4752 KB 4776 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL/Mud/Gamma. Wells Ranch AE 30-61-01AHNA will be designated well for Resistivity Log on 6 well PAD.

**CASING, LINER AND CEMENT**

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26+0/0	16+0/0	42.09	0	124	80	0	124	VISU
SURF	13+3/4	9+5/8	36.00	0	628	364	0	628	VISU
1ST	8+3/4	7+0/0	26.00	0	6,721	565	560	6,721	CBL
1ST LINER	6+1/8	4+1/2	11.60	6778	11,997	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:

### FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PIERRE	1,087				
PARKMAN	3,535				
SUSSEX	4,275				
SHANNON	4,832				
NIOBRARA	6,458				

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: \_\_\_\_\_

Email: eroberts@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400711498	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400711501	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"/>
<b>Other Attachments</b>			
400710600	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711459	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711465	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711467	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711468	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711469	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400711505	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)