

FORM
5Rev
09/14

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:

400731904

Date Received:

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.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 100322

Contact Name: Kathleen Mills

Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2226

Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

API Number 05-123-39069-00

County: WELD

Well Name: NCLP

Well Number: AA06-66-1HNC

Location: QtrQtr: SWNW Section: 4 Township: 6N Range: 63W Meridian: 6

Footage at surface: Distance: 2272 feet Direction: FNL Distance: 100 feet Direction: FWL

As Drilled Latitude: 40.516764 As Drilled Longitude: -104.450865

GPS Data:

Date of Measurement: 10/31/2014 PDOP Reading: 2.5 GPS Instrument Operator's Name: TOA SAGAPOLUTELE

** If directional footage at Top of Prod. Zone Dist.: 2315 feet. Direction: FNL Dist.: 447 feet. Direction: FEL

Sec: 5 Twp: 6N Rng: 63W

** If directional footage at Bottom Hole Dist.: 2299 feet. Direction: FNL Dist.: 536 feet. Direction: FWL

Sec: 6 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) 06/24/2014 Date TD: 07/03/2014 Date Casing Set or D&A: 07/06/2014

Rig Release Date: 08/14/2014 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 16445 TVD** 6787 Plug Back Total Depth MD 16429 TVD** 6787

Elevations GR 4709 KB 4733 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

USIT, MUD, GR

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	20	16	42.09	0	124	80	0	124	VISU
SURF	13+3/4	9+5/8	36	0	819	438	0	819	VISU
1ST	8+3/4	7	26	0	7,018	574	450	7,018	CALC
1ST LINER	6+1/8	4+1/2	11.6	6904	16,430	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	1,037				
PARKMAN	3,494				
SUSSEX	4,290				
SHANNON	4,918				
TEEPEE BUTTES	5,775				
NIOBRARA	6,587				NBRR B 6739, NBRR C 6946

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 ?
<u>Attachment Checklist</u>		
400731920	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400731918	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"/>
<u>Other Attachments</u>		
400731921	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732833	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732836	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732838	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732847	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732850	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732853	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732855	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400732857	PDF-GAMMA RAY	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)