

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



DE ET OE ES

Document Number:

400780603

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 05-123-13881-00

County: WELD

Well Name: SCHMIDT AMOCO UPRR

Well Number: 44-23

Location: QtrQtr: SESE Section: 23 Township: 4N Range: 66W Meridian: 6

Footage at surface: Distance: 534 feet Direction: FSL Distance: 645 feet Direction: FEL

As Drilled Latitude: As Drilled Longitude:

GPS Data:

Date of Measurement: PDOP Reading: GPS Instrument Operator's Name:

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number: 67329

Spud Date: (when the 1st bit hit the dirt) 03/15/1988 Date TD: 03/20/1988 Date Casing Set or D&A: 03/21/1988

Rig Release Date: 03/21/1988 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7335 TVD** Plug Back Total Depth MD 7335 TVD**

Elevations GR 4742 KB 4753 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

2-CBL

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
SURF	12+1/4	8+5/8	24	0	353		0	353	VISU
1ST	7+7/8	4+1/2	15.1	0	7,330		6,300	7,330	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	1ST	4,450	202	4,150	4,450
SQUEEZE	1ST	4,900	200	4,470	4,900
SQUEEZE	SURF	460	197	110	460

Details of work:

1-1/4" STRING SIZE; 12/8/2014 PERF'D 4 HOLES @4150', 2 HOLES @4450'. 12/4/2014 SQUEEZE 110-460' AND ANNULAR FILL @4470-4900'. 12/16/2014 SQUEEZE 4150-4450'.

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	

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 ?
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Attachment Checklist

400780612	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" 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

400780610	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400780611	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)