

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:

401095609

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: Julie Webb

Name of Operator: NOBLE ENERGY INC

Phone: (720) 587-2223

Address: 1625 BROADWAY STE 2200

Fax:

City: DENVER

State: CO

Zip: 80202

API Number 05-123-42885-00

County: WELD

Well Name: Shadow

Well Number: A26-663

Location: QtrQtr: SWNE Section: 30 Township: 6N Range: 63W Meridian: 6

Footage at surface: Distance: 2261 feet Direction: FNL Distance: 2335 feet Direction: FEL

As Drilled Latitude: 40.458560 As Drilled Longitude: -104.478610

GPS Data:

Date of Measurement: 05/17/2016 PDOP Reading: 3.0 GPS Instrument Operator's Name: Toa Sagapolutele

** If directional footage at Top of Prod. Zone Dist.: 1797 feet. Direction: FNL Dist.: 1861 feet. Direction: FEL

Sec: 30 Twp: 6N Rng: 63W

** If directional footage at Bottom Hole Dist.: 1705 feet. Direction: FNL Dist.: 1863 feet. Direction: FEL

Sec: 26 Twp: 6N Rng: 64W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 06/11/2016 Date TD: 06/16/2016 Date Casing Set or D&A: 06/18/2016

Rig Release Date: 06/18/2016 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17466 TVD** 6671 Plug Back Total Depth MD 17406 TVD** 6671

Elevations GR 4650 KB 4680

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, GR, Neutron

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 | 16 | 42.09 | 0 | 110 | 64 | 0 | 110 | VISU |
| SURF | 13+1/2 | 9+5/8 | 36 | 0 | 1,918 | 745 | 0 | 1,918 | VISU |
| 1ST | 8+1/2 | 5+1/2 | 20 | 0 | 17,451 | 2,274 | 1,200 | 17,451 | CBL |

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 | 320 | | | | |
| PARKMAN | 3,557 | | | | |
| SUSSEX | 4,334 | | | | |
| SHANNON | 4,919 | | | | |
| NIOBRARA | 6,795 | | | | |

Comment:

As built GPS was surveyed after conductor was set on 5/5/2016
No mud logs ran.
Per COGCC request, partners were notified of TPZ changes to this well via revised 30-day notices or courtesy notice.

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

Signed: _____

Print Name: Julie Webb

Title: Regulatory Analyst Date: _____ Email: jwebb@progressivepcs.net

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> | | | |
| 401095685 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 401095667 | 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> | | | |
| 401095646 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401095648 | LAS-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401095653 | PDF-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401095656 | PDF-GAMMA RAY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401095658 | PDF-NEUTRON | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401095664 | LAS-NEUTRON | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401095687 | 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)