

**State of Colorado  
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

**04/25/2017**

Document Number:

**401266069**

**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>100322</u>	Contact Name and Telephone:
Name of Operator: <u>NOBLE ENERGY INC</u>	Name: <u>JENNIFER CARTER</u>
Address: <u>1625 BROADWAY STE 2200</u>	Phone: <u>(303) 228-4000</u> Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>JENNIFER.CARTER@NBLENERGY.COM</u>

**OPERATOR COMMENTS AND SUBMITTAL**

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

Signed: \_\_\_\_\_ Print Name: JENNIFER CARTER

Title: PRODUCTION ANALYST Date: 4/25/2017 Email: JENNIFER.CARTER@NBLEN

By checking this box, operator is requesting an updated Delinquent Report, AFTER the Form 7 has been processed

Operator Comments:

**Monthly Report of Operations**

Submitted Items Summary Totals:

Submitted: 12 In Process: 12 Modified: 0 Deleted: 0

Total 12 In Process

No	API #	Well Name	Formation Code	Well Status
<b>Report Month: 09/2016</b>				
1	123-23707-00	SPIKE STATE CC 30-19 JS	JSND	PR
2	123-25433-00	SPIKE STATE CC 30-18 JS	JSND	PR
<b>Report Month: 10/2016</b>				
3	123-23707-00	SPIKE STATE CC 30-19 JS	JSND	PR
4	123-25433-00	SPIKE STATE CC 30-18 JS	JSND	PR
<b>Report Month: 11/2016</b>				
5	123-23707-00	SPIKE STATE CC 30-19 JS	JSND	PR
6	123-25433-00	SPIKE STATE CC 30-18 JS	JSND	PR
<b>Report Month: 12/2016</b>				
7	123-23707-00	SPIKE STATE CC 30-19 JS	JSND	PR
8	123-25433-00	SPIKE STATE CC 30-18 JS	JSND	PR
<b>Report Month: 01/2017</b>				
9	123-23707-00	SPIKE STATE CC 30-19 JS	JSND	PR
10	123-25433-00	SPIKE STATE CC 30-18 JS	JSND	PR
<b>Report Month: 02/2017</b>				
11	123-23707-00	SPIKE STATE CC 30-19 JS	JSND	PR
12	123-25433-00	SPIKE STATE CC 30-18 JS	JSND	PR

Total 0 Modified

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
	- -			

Total 0 Deleted

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
	- -			

## Attachment Check List

**Att Doc Num**      **Name**

401266071	Imported Data
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Total Attach: 1 Files

### General Comments

**User Group**      **Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)