FORM 5A Rev

02/08

## State of Colorado Oil and Gas Conservation Commission

STATE OF COLORADO

DE	ET	OE	ES

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109

**Document Number:** 

400114919

## **COMPLETED INTERVAL REPORT**

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number:100322	4. Contact Name: Justin Garrett				
2. Name of Operator: NOBLE ENERGY INC	Phone: (303) 228-4449				
3. Address: 1625 BROADWAY STE 2200	Fax: (303) 228-4286				
City: DENVER State: CO Zip: 80202					
5. API Number 05-123-23129-00	6. County: WELD				
7. Well Name: DINNER	Well Number: 14-35				
8. Location: QtrQtr: SWSW Section: 14 Township: 6N	Range: 65W Meridian: 6				
9. Field Name: WATTENBERG Field Code: 907	750				
Completed Interval					
FORMATION: CODELL	Status: COMMINGLED				
Treatment Date:07/21/2010 Date of First Production this formation:09/01/2005					
Perforations Top: 7047 Bottom: 7060 No. Holes:	52 Hole size:				
Provide a brief summary of the formation treatment: Open Hole	e: 🔲				
Codell refrac Frac'd Codell w/126407 gals Vistar with 243800 lbs Ottawa sand					
This formation is commingled with another formation: X Yes No					
Test Information:					
Date: Hours: Bbls oil: Mcf Gas: _	Bbls H2O:				
Calculated 24 hour rate: Bbls oil: Mcf Gas:	Bbls H2O: GOR:				
Test Method: Casing PSI: Tut	bing PSI: Choke Size:				
Gas Disposition: Gas Type: B	TU Gas: API Gravity Oil:				
Tubing Size: Tubing Setting Depth: Tbg setting dat	te: Packer Depth:				
Reason for Non-Production:					
Date formation Abandoned: Squeeze:  Yes No	If yes, number of sacks cmt				
Bridge Plug Depth: Sacks cement on top:					

FORMATION: 1	FORMATION: NIOBRARA-CODELL Status: PRODUCING					
Treatment Date:	07/21/2010 Date of First Production this formation: 09/01/20	05				
Perforations	Top:6860					
Provide a brief summary of the formation treatment:  Open Hole:						
Niobrara & Code	l are commingled; nothing new happened in Niobrara during Codell refrac					
This formation is	ommingled with another formation: Yes X No					
Test Information						
Date: 09/07/20	0 Hours: 24 Bbls oil: 1 Mcf Gas: 10 Bbls H2O: 0	_				
Calculated 24 hou	r rate: Bbls oil:1	GOR: 10000				
Test Method: Flo	wing Casing PSI: 1050 Tubing PSI: 1000 Cho	ke Size:16/64				
Gas Disposition:	SOLD Gas Type: WET BTU Gas: 1294 API Grav	rity Oil: 52				
Tubing Size: 2	+ 3/8 Tubing Setting Depth:7034 Tbg setting date:07/26/2010 Packer	Depth:				
Reason for Non-F	roduction:					
Date formation Ab	andoned: Squeeze: Yes No If yes, number of sacks cn	nt				
Bridge Plug Depth	: Sacks cement on top:					
Comment:						
I hereby certify all	statements made in this form are to the best of my knowledge true correct and complete					
I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.						
Signed:	Print Name: Justin Garrett					
Title: Regulate	ry Specialist Date: Email JDGarrett@nobleenergyin	c.com				
	mation provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules	and applicable				
orders and is hereby approved.  COCCC Approved.  Director of COCCC						
COGCC Approved: Director of COGCC Date:						
Attachment Check List						
Att Doc Num	Name					
Total Attach: 0 File	ı S					
	General Comments					
User Group	Comment	Comment Date				
Total: 0 commer	t(s)					