

FORM  
5A

Rev  
02/08

State of Colorado  
Oil and Gas Conservation Commission

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



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**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  
2. Name of Operator: NOBLE ENERGY INC  
3. Address: 1625 BROADWAY STE 2200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Andrea Rawson  
Phone: (303) 228-4253  
Fax: (303) 228-4286

5. API Number 05-123-22213-00  
6. County: WELD  
7. Well Name: FIECHTNER P  
Well Number: 18-25  
8. Location: QtrQtr: NESW Section: 18 Township: 3N Range: 67W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING  
Treatment Date: 12/06/2010 Date of First Production this formation: 12/21/2010  
Perforations Top: 7210 Bottom: 7219 No. Holes: 36 Hole size: 42  
Provide a brief summary of the formation treatment: Open Hole: ☐  
Re-Frac'd Codell w/ 127,092 gals of Vistar with 244,563#'s of Ottawa sand.  
This formation is commingled with another formation: ☐ Yes ☒ No  
**Test Information:**  
Date: 12/30/2010 Hours: 24 Bbls oil: 4 Mcf Gas: 34 Bbls H2O: 5  
Calculated 24 hour rate: Bbls oil: 4 Mcf Gas: 34 Bbls H2O: 5 GOR: 8500  
Test Method: Flowing Casing PSI: 651 Tubing PSI: 631 Choke Size: 30  
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1254 API Gravity Oil: 65  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7197 Tbg setting date: 11/22/2010 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: \_\_\_\_\_

Comment:

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

Signed: \_\_\_\_\_ Print Name: Andrea Rawson  
Title: Regulatory Specialist Date: \_\_\_\_\_ Email arawson@nobleenergyinc.com

### Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)