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|---|--|--|---|----|----|----|----|
| FORM 5 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 |  | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number: 400109137 | DE | ET | OE | ES |
| DE | ET | OE | ES | | | | |
| 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 <input checked="" type="checkbox"/> Final completion <input type="checkbox"/> Preliminary 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: Justin Garrett Phone: (303) 228-4449 Fax: (303) 228-4286 | | | | | |
| 5. API Number 05-123-31160-00 7. Well Name: GREEN USX EE 8. Location: QtrQtr: SENW Section: 13 Township: 7N Range: 65W Meridian: 6 Footage at surface: Distance: 1877 feet Direction: FNL Distance: 2086 feet Direction: FWL As Drilled Latitude: 40.575160 As Drilled Longitude: -104.612760 | | 6. County: WELD Well Number: 13-06 | | | | | |
| GPS Data: Data of Measurement: 08/31/2010 PDOP Reading: 4.7 GPS Instrument Operator's Name: Paul Tappy | | | | | | | |
| ** 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: | | | | | | | |
| 9. Field Name: WATTENBERG 11. Federal, Indian or State Lease Number: | | 10. Field Number: 90750 | | | | | |
| 12. Spud Date: (when the 1st bit hit the dirt) 07/18/2010 13. Date TD: 07/21/2010 14. Date Casing Set or D&A: 07/21/2010 | | | | | | | |
| 15. Well Classification: <input type="checkbox"/> Dry <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas/Coalbed <input type="checkbox"/> Disposal <input type="checkbox"/> Stratigraphic <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Storage <input type="checkbox"/> Observation | | | | | | | |
| 16. Total Depth MD 7485 TVD** | | 17 Plug Back Total Depth MD 7431 TVD** | | | | | |
| 18. Elevations GR 4966 KB 4979 | | One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available. | | | | | |
| 19. List Electric Logs Run: CBL/GR/CCL, DIL/GL/GR, Density/Neutron/Microlog | | | | | | | |
| 20. Casing, Liner and Cement: | | | | | | | |

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

CASING

| 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 | | 0 | 816 | 269 | 0 | 816 | CALC |
| 1ST | 7+7/8 | 4+1/2 | | 0 | 7,475 | 610 | 2,200 | 7,475 | CBL |

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

| Method used | String | Cementing tool setting/pref depth | Cement volume | Cement top | Cement bottom |
|-------------|--------|-----------------------------------|---------------|------------|---------------|
| | | | | | |

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

| FORMATION NAME | Measured Depth | | Check if applies | | COMMENTS (All DST and Core Analyses must be submitted to COGCC) |
|----------------|----------------|--------|--------------------------|--------------------------|---|
| | Top | Bottom | DST | Cored | |
| NIOBRARA | 6,986 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| FORT HAYS | 7,266 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| CODELL | 7,288 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| GREENHORN | 7,422 | | <input type="checkbox"/> | <input type="checkbox"/> | |

Comment:

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: Regulatory Specialist Date: 11/17/2010 Email: JDGarrett@nobleenergyinc.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | | | |
|-----------------------------|------------------------|------------|-------------------------------------|----|-------------------------------------|
| <u>Attachment Checklist</u> | | | | | |
| 400109143 | 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"/> |
| <u>Other Attachments</u> | | | | | |
| 400109137 | FORM 5 SUBMITTED | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| 400109142 | LAS-TRIPLE COMBINATION | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|--------------------------|-----------------------|----------------------------|
| Permit | req digital CBL | 1/18/2011 8:52:50 AM |

Total: 1 comment(s)