

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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Document Number:

400151110

**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: Justin Garrett  
Phone: (303) 228-4449  
Fax: (303) 228-4286

5. API Number 05-123-15289-00  
6. County: WELD  
7. Well Name: CLIFFORD  
Well Number: L3-6  
8. Location: QtrQtr: SEnw Section: 3 Township: 3N Range: 66W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING

Treatment Date: 01/25/2011 Date of First Production this formation: 11/09/1991  
Perforations Top: 7308 Bottom: 7323 No. Holes: 105 Hole size:

Provide a brief summary of the formation treatment: Open Hole: ☐

Codell trfrac  
Frac'd Codell w/128508 gals Vistar and Slick Water with 242540 lbs Ottawa sand

This formation is commingled with another formation: ☐ Yes ☒ No

**Test Information:**

Date: 03/11/2011 Hours: 24 Bbls oil: 3 Mcf Gas: 78 Bbls H2O: 2  
Calculated 24 hour rate: Bbls oil: 3 Mcf Gas: 78 Bbls H2O: 2 GOR: 26000  
Test Method: Flowing Casing PSI: 360 Tubing PSI: 360 Choke Size: 48/64  
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1252 API Gravity Oil: 61  
Tubing Size: 1.66 Tubing Setting Depth: 7271 Tbg setting date: 01/31/2011 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: Justin Garrett

Title: Regulatory Specialist Date: 4/19/2011 Email JDGarrett@nobleenergyinc.com

### **Attachment Check List**

Att Doc Num	Name
400151110	FORM 5A SUBMITTED

Total Attach: 1 Files

### **General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)