

FORM
5Rev
02/08

State of Colorado

Oil and Gas Conservation Commission

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



DE ET OE ES

Document Number:

400401000

Date Received:

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 ☐ Final completion ☒ Preliminary completion

1. OGCC Operator Number: 100322

4. Contact Name: SUSAN MILLER

2. Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4246

3. Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER State: CO Zip: 80202

5. API Number 05-123-36443-00

6. County: WELD

7. Well Name: Sauer

Well Number: F33-78-1HC

8. Location: QtrQtr: SESW Section: 33 Township: 5N Range: 65W Meridian: 6

Footage at surface: Distance: 238 feet Direction: FSL Distance: 1564 feet Direction: FWL

As Drilled Latitude: 40.349130 As Drilled Longitude: -104.672250

GPS Data:

Data of Measurement: 09/07/2012 PDOP Reading: 1.6 GPS Instrument Operator's Name: Wyatt Hall

** If directional footage at Top of Prod. Zone Dist.: 397 feet. Direction: FSL Dist.: 980 feet. Direction: FWL

Sec: 33 Twp: 5N Rng: 65W

** If directional footage at Bottom Hole Dist.: 397 feet. Direction: FSL Dist.: 980 feet. Direction: FWL

Sec: 33 Twp: 5N Rng: 65W

9. Field Name: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 03/31/2013 13. Date TD: 04/06/2013 14. Date Casing Set or D&A: 04/06/2013

15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7188 TVD** 7033 17 Plug Back Total Depth MD 0 TVD** 0

18. Elevations GR 4654 KB 4667

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:

No logs were run.

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	18+1/2	16		0	93	6	0	93	VISU
SURF	13+3/4	9+5/8	36	0	611	317	0	611	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 04/06/2013

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE	7,180	190	6,530	7,180
	OPEN HOLE	6,620	310	5,920	6,620

Details of work:

Plug #1 set at 7,180'; 650' in length; 38.5 bbls (190 sks); 15.8 lb 1.15 ft³/sk yeild; PlugCem
 Plug #2 set at 6620'; 700' in length; 52 bbls (310 sks); 17.5 lb 0.94 ft³/sk yeild; GraniteCem

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	
			<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Noble was not able to obtain the necessary build rates while drilling the curve to hit the target formation. Noble plans to return to well and kick-off at 6220' and drill to same bottomhole location and formation objective, Codell.

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

Signed: _____ Print Name: SUSAN MILLER

Title: Regulatory Analyst III

Date:

Email: smiller@nobleenergyinc.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400401385	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400401016	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400401000	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)