

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33190
Name: Noble Energy, Inc.
Address: 1625 Broadway, Suite 2000
City/State/Zip: Denver, CO 80202
Purchaser: Bittercreek Pipeline
Operator Contact Person: Joe Mazotti
Phone: (303) 228-4223
Contractor: Name: Excell Services Inc., Wray, CO
License: 8273

Wellsite Geologist: none
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: n/a

Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>7/15/2007</u>	<u>7/16/2007</u>	<u>8/27/2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 023 - 20768 - 00-00
County: Cheyenne
NW NE _____ Sec. 16 Twp. 3 S. R. 42 East West
900 570 feet from S / (N) (circle one) Line of Section
620 2370 feet from (E) / W (circle one) Line of Section
Per oper kcc-DL

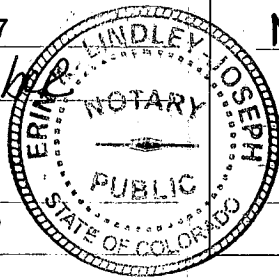
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Rueb Farm Well #: 31 - 16
Field Name: Cherry Creek
Producing Formation: Niobrara
Elevation: Ground: 3746' Kelly Bushing: 3752'
Total Depth: 1750' Plug Back Total Depth: 1704'
Amount of Surface Pipe Set and Cemented at 302' cmt w/ 100 sx Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from n/a
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Air I NCR 1-9-09
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: _____
Title: Regulatory Analyst Date: 10/02/2007
Subscribed and sworn to before me this 2nd day of October
20 07.
Notary Public: Ernie Lindley Joseph
Date Commission Expires My Commission Expires Aug. 20, 2008



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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OCT 03 2007

Operator Name: **Noble Energy, Inc.** Lease Name: **Rueb Farm** Well #: **31 - 16**
 Sec. **16** Twp. **3** S. H. **42** [] East [x] West County: **Cheyenne**

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	Sample
Samples Sent to Geological Survey	Yes <input type="checkbox"/> No <input type="checkbox"/>	Name	Top	Datum
Cores Taken	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Niobrara	1538'	
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

CASING RECORD New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9 7/8"	7"	17 Lbs./Ft.	302'	50/50 POZ	100	3% CaCl, .25% Flo-cele
Production	6 1/4"	4 1/2"	9.5 Lbs./Ft.	1745'	Lead, Type III	55	12% gel, 2% CaCl, .25% flo-cele
					Tail, 50/50 POZ	75	3% CaCl, .25 flo-cele

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate Protect Casing Plug Back TD Plug Off Zone				

PERFORATION RECORD - Bridge Plugs Set/Type
Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record
(Amount and Kind of Material Used)

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record	Depth
3 spf	Perf. Niobrara interval from 1542' to 1578' (36', 3spf, 108 holes). .41"EHD.	Niobrara frac'd with 500 gals 7.5% HCL acid, 12,000 gals of 25% CO2 foamed gel pad; 30,856 gals 25% CO2 foamed gel carrying 99,760 lbs 16/30 sand. AIP-642 psi; AIR-14.2 bpm.	

TUBING RECORD	Size	Set At	Packer At	Liner Run	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Date of First, Resumed Production, SWD or Enhr.	Producing Method	Flowing	Pumping	Gas Lift	Other (Explain)
9/7/2007					
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	72	0	0	

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO 18.) Other (Specify)

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. LL3
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-298-8143
 E-mail: bisonoil2@qwest.net

REF. INVOICE # 6727
 LOCATION CR 2
 FOREMAN PAT STALW JOE

REED STALW

TREATMENT REPORT

DATE	CUSTOMER ACCT #	WELL NAME	OT/TR	SECTION	TWP	RGE	COUNTY	FORMATION
7-16-07		31-16					Cheyenne	

CHARGE TO <u>Hotchkiss Excell</u>	OWNER <u>NOBLE</u>
MAILING ADDRESS	OPERATOR
CITY	CONTRACTOR <u>EXCELL #17</u>
STATE ZIP CODE	DISTANCE TO LOCATION
TIME ARRIVED ON LOCATION <u>11:00</u>	TIME LEFT LOCATION <u>12:30pm</u>

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE <u>6 1/2</u>	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
TOTAL DEPTH <u>1750</u>	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG		
	TUBING WEIGHT	OPEN HOLE	STRING		
CASING SIZE <u>4 1/2</u>	TUBING CONDITION		TUBING		

		TREATMENT VIA	TYPE OF TREATMENT	TREATMENT RATE
CASING DEPTH <u>1735</u>			<input type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM
CASING WEIGHT <u>11.6</u>	PACKER DEPTH		<input checked="" type="checkbox"/> PRODUCTION CASING	INITIAL BPM
CASING CONDITION <u>(good)</u>			<input type="checkbox"/> SQUEEZE CEMENT	FINAL BPM

PRESSURE SUMMARY			
BREAKDOWN or CIRCULATING psi	AVERAGE psi		<input type="checkbox"/> ACID BREAKDOWN
FINAL DISPLACEMENT psi	ISIP psi		<input type="checkbox"/> ACID STIMULATION
ANNULUS psi	5 MIN SIP psi		<input type="checkbox"/> ACID SPOTTING
MAXIMUM psi	15 MIN SIP psi		<input type="checkbox"/> MISC PUMP
MINIMUM psi			<input type="checkbox"/> OTHER

INSTRUCTIONS PRIOR TO JOB MTRU, Gaff meeting, EST-CIA with 10 BBLs 12:30
MHP 55 KSL soap cement 12.5 Density 2.85 YIELD MHP 755MS EAR cement
15.7 Density 1.13 YIELD, DROP PLUG, DISPLACE 26.6 BBLs H2O
36MP PLUG 1200 to 1400 PSI, RELEASE PRESSURE, WASH UP TO PIT
BE DOWN

JOB SUMMARY
 DESCRIPTION OF JOB EVENTS MTRU 11:00, Gaff 11:20, Cem 11:30, DROP PLUG 11:40,
DISPLACE 11:40, 10 Awt 11:45 200 PSI, 20 Awt 11:47 600 PSI,
26.6 Awt 1400 PSI BBLs TO PIT 6

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OCT 03 2007

CONSERVATION DIVISION
 WICHITA, KS

[Signature]

7-16-07

AUTHORIZATION TO PROCEED

TITLE

DATE

Customers hereby acknowledges and specifically agrees to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. LL3
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-298-8143
 E-mail: bisonoil2@qwest.net

REF. INVOICE # 6334
 LOCATION CRQ
 FOREMAN PAT NOWID
JUSTIN

RUBEN STARRS

TREATMENT REPORT

DATE	CUSTOMER ACCT #	WELL NAME	QT/OTR	SECTION	TWP	RGE	COUNTY	FORMATION
7-15-07		71-16					CLAY COUNTY	

CHARGE TO <u>EXCEL SERVICES</u>	OWNER <u>NOBLE</u>
MAILING ADDRESS	OPERATOR
CITY	CONTRACTOR <u>MACPHERSON DRILLING</u>
STATE ZIP CODE	DISTANCE TO LOCATION
TIME ARRIVED ON LOCATION <u>12:45</u>	TIME LEFT LOCATION <u>2:00</u>

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE <u>8 7/8</u>	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
TOTAL DEPTH <u>3061</u>	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG		
	TUBING WEIGHT	OPEN HOLE	STRING		
CASING SIZE <u>7"</u>	TUBING CONDITION		TUBING		
CASING DEPTH <u>302</u>		TREATMENT VIA	TYPE OF TREATMENT		TREATMENT RATE
CASING WEIGHT <u>17#</u>	PACKER DEPTH		<input checked="" type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM	
CASING CONDITION <u>GOOD</u>			<input type="checkbox"/> PRODUCTION CASING	INITIAL BPM	
PRESSURE SUMMARY			<input type="checkbox"/> SOEEZE CEMENT	FINAL BPM	
BREAKDOWN or CIRCULATING psi	AVERAGE psi		<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM	
FINAL DISPLACEMENT psi	ISIP psi		<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM	
ANNULUS psi	5 MIN SIP psi		<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM	
MAXIMUM psi	15 MIN SIP psi		<input type="checkbox"/> MISC PUMP		
MINIMUM psi			<input type="checkbox"/> OTHER	HYD HHP = RATE X PRESSURE X 40.8	

INSTRUCTIONS PRIOR TO JOB make safety meeting, set pipe, map 100555 cement
15.7 DISPL 1.13 YIELD DISPLACE 115 DBIS 1120, SET IN WELL, WASH UP 10 FT
8' Down.

JOB SUMMARY

DESCRIPTION OF JOB EVENTS MAKE 12:45 SAFETY 1:00 CEM 1:09
DISPLACE 1:15 PLOG DOWN 1:25 BIBIS RETURNS 1:45

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OCT 03 2007

CONSERVATION DIVISION

Bill E. Markham
 AUTHORIZATION TO PROCEED

TITLE

DATE

Customers hereby acknowledges and specifically agrees to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.