

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33190  
Name: Noble Energy, Inc.  
Address 1: 1625 Broadway, Ste 2200  
Address 2: \_\_\_\_\_  
City: DENVER State: CO Zip: 80202 + \_\_\_\_\_  
Contact Person: Cheryl Johnson  
Phone: ( 303 ) 228-4437  
CONTRACTOR: License # 33532  
Name: Advanced Drilling Technologies LLC  
Wellsite Geologist: none  
Purchaser: \_\_\_\_\_

## Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SIOW
- Gas     D&A     ENHR     SIGW
- OG     GSW     Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic     Other (Core, Expl., etc.): \_\_\_\_\_

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

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

- Deepening     Re-perf.     Conv. to ENHR     Conv. to SWD
- Conv. to GSW
- Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_
- Commingled    Permit #: \_\_\_\_\_
- Dual Completion    Permit #: \_\_\_\_\_
- SWD    Permit #: \_\_\_\_\_
- ENHR    Permit #: \_\_\_\_\_
- GSW    Permit #: \_\_\_\_\_

1/31/2011    2/2/2011    5/9/2011

Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date    Recompletion DateAPI No. 15 - 15-023-21278-00-00

Spot Description: \_\_\_\_\_

NE SW NE SW Sec. 33 Twp. 5 S. R. 39  East  West1725 Feet from  North /  South Line of Section1830 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE     NW     SE     SWCounty: CheyenneLease Name: Nipps Well #: 23-33Field Name: unknownProducing Formation: NiobraraElevation: Ground: 3591 Kelly Bushing: 3597Total Depth: 1565 Plug Back Total Depth: 1475Amount of Surface Pipe Set and Cemented at: 393 FeetMultiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

## Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bblsDewatering method used: Evaporated

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

## AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

## KCC Office Use ONLY

- Letter of Confidentiality Received  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: Deanna Garriss Date: 01/24/2012



1072641

Operator Name: Noble Energy, Inc. Lease Name: Nipps Well #: 23-33  
 Sec. 33 Twp. 5 S. R. 39  East  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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Niobrara	1334	
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Submitted Electronically (If no, Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Triple Combo CBL/CCL/GR				

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> 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	9.8750	7	17	388	50/50 POZ	163	3% CaCl 2% gel
Production	6.25	4.5	11.6	1565	50/50 POZ	101	12% gel 2% CaCl

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
3	Perf intervals 1332-1358	Frac'd w/500 gals 7.5% HCl acid; 114 bbls Mav-100 gelled water pad;	
	(26' 78 holes) .410 EH 120 Deg	256 bbls Mav-100 gelled water w/100,280# 16/30 & 12/20 Daniels Sand;	
		8.3 bbls Mav-100 gelled water flush	

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. 6/1/2011	Producing Method: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls. 0	Gas Mcf 77	Water Bbls. 0	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: 1332-1358
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### Summary of Changes

Lease Name and Number: Nipps 23-33

API/Permit #: 15-023-21278-00-00

Doc ID: 1072641

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved Date	05/31/2011	01/24/2012
Completion Or Recompletion Date	4/15/2011	5/9/2011
Date of First or Resumed Production or SWD or Enhr Disposition Of Gas - Sold	No	6/1/2011  Yes
Elogs_PDF	Triple Combo	Triple Combo CBL/CCL/GR
Ground Surface Elevation	3592	3591
Kelly Bushing Elevation	3598	3597
LocationInfoLink	<a href="https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=33&amp;tFrac'd w/100280#Daniel Sand">https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=33&amp;tFrac'd w/100280#Daniel Sand</a>	<a href="https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=33&amp;tFrac'd w/500 gals 7.5% HCl acid; 114 bbls Mav-100 gelled water pad; 256 bbls Mav-100 gelled water w/100,280# 16/30 &amp;">https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=33&amp;tFrac'd w/500 gals 7.5% HCl acid; 114 bbls Mav-100 gelled water pad; 256 bbls Mav-100 gelled water w/100,280# 16/30 &amp;</a>
Perf_Material_1		
Perf_Material_2	16/30 & 12/20	

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Perf_Material_3		8.3 bbls Mav-100 gelled water flush
Producing Method Flowing	No	Yes
Production - Barrels Oil		0
Production - Barrels of Water		0
Production - MCF Gas		77
Production Interval #1		1332-1358
Save Link	<a href="http://../kcc/detail/operatorEditDetail.cfm?docID=1051452">../kcc/detail/operatorEditDetail.cfm?docID=1051452</a>	<a href="http://../kcc/detail/operatorEditDetail.cfm?docID=1072641">../kcc/detail/operatorEditDetail.cfm?docID=1072641</a>