



State of Colorado
Oil and Gas Conservation Commr



02577032

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)394-2100 Fax: (303)394-2109

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

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MAR 03 2010

COGCC/Rifle Office

1. OGCC Operator Number: 10071	4. Contact Name
2. Name of Operator: Bill Barrett Corporation	Matt Barber
3. Address: 1099 18th Street, Suite 2300	Phone: (303) 312-8168
City: Denver State: CO Zip: 80202	Fax: (303) 291-0420
5. API Number 05- U45-T7731	OGCC Facility ID Number
6. Well/Facility Name: Miller	Well/Facility Number 34B-36-692
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SWSE, Sec. 36, T6S, R92W, 6th PM	
9. County: Garfield	10. Field Name: Mamm Creek
11. Federal, Indian or State Lease Number:	

Complete the Attachment Checklist	OP OGCC
Survey Plat	
Directional Survey	
Surface Eqpm Diagram	
Technical Info Page	✓
Other	

General Notice

<input type="checkbox"/> CHANGE OF LOCATION:	Attach New Survey Plat	(a change of surface qtr/qtr is substantive and requires a new permit)
Change of Surface Footage from Exterior Section Lines:	FNL/FSL	FEL/FWL
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer		attach directional survey
Latitude	Distance to nearest property line	Distance to nearest bldg, public rd, utility or RR
Longitude	Distance to nearest lease line	Is location in a High Density Area (rule 603b)?
Ground Elevation	Distance to nearest well same formation	Surface owner consultation date:
GPS DATA:		
Date of Measurement	PDOP Reading	Instrument Operator's Name
<input type="checkbox"/> CHANGE SPACING UNIT	Formation Code	Spacing order number
Formation	Unit Acreage	Unit configuration
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME	NUMBER
Effective Date:	From:	To:
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	Effective Date:	
<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS	
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned:	
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Ready for Inspection:	MIT required if shut in longer than two years. Date of last MIT	
<input type="checkbox"/> SPUD DATE:	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS	(6 mos from date casing set)
<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	*submit cbl and cement job summaries	
Method used	Cementing tool setting/berf depth	Cement top
	Cement volume	Cement bottom
		Date
<input type="checkbox"/> RECLAMATION:	Attach technical page describing final reclamation procedures per Rule 1004.	
Final reclamation will commence on approximately	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.	

Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date:	Date Work Completed:
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)	
<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Request to Complete
	for Spills and Releases

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

Signed: Matt Barber	Date: 03/02/2010	Email: mbarber@bilbarrettcorp.com
Print Name: Matt Barber	Title: Permit Analyst	
COGCC Approved: <i>Kevin J. King</i>	Title: EIT III	Date: MAR 04 2010
CONDITIONS OF APPROVAL, IF ANY:		

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

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MAR 03 2010

COGCC/Rifle Office

1. OGCC Operator Number: 10071 API Number: 05-045-17731

2. Name of Operator: Bill Barrett Corporation

3. Well Name: Miller Well Number: 34B-36-692

4. Location: (QtrQtr, Sec, Twp, Rng, Mer): SWSE, Sec. 36, T6S, R92W

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

The referenced well has been successfully cemented according to the approved plan and a summary of the Bradenhead monitoring. Bill Barrett Corporation requests approval to commence completion operations.

Attachments:

CBL

AS-BUILT WELLBORE SCHEMATIC

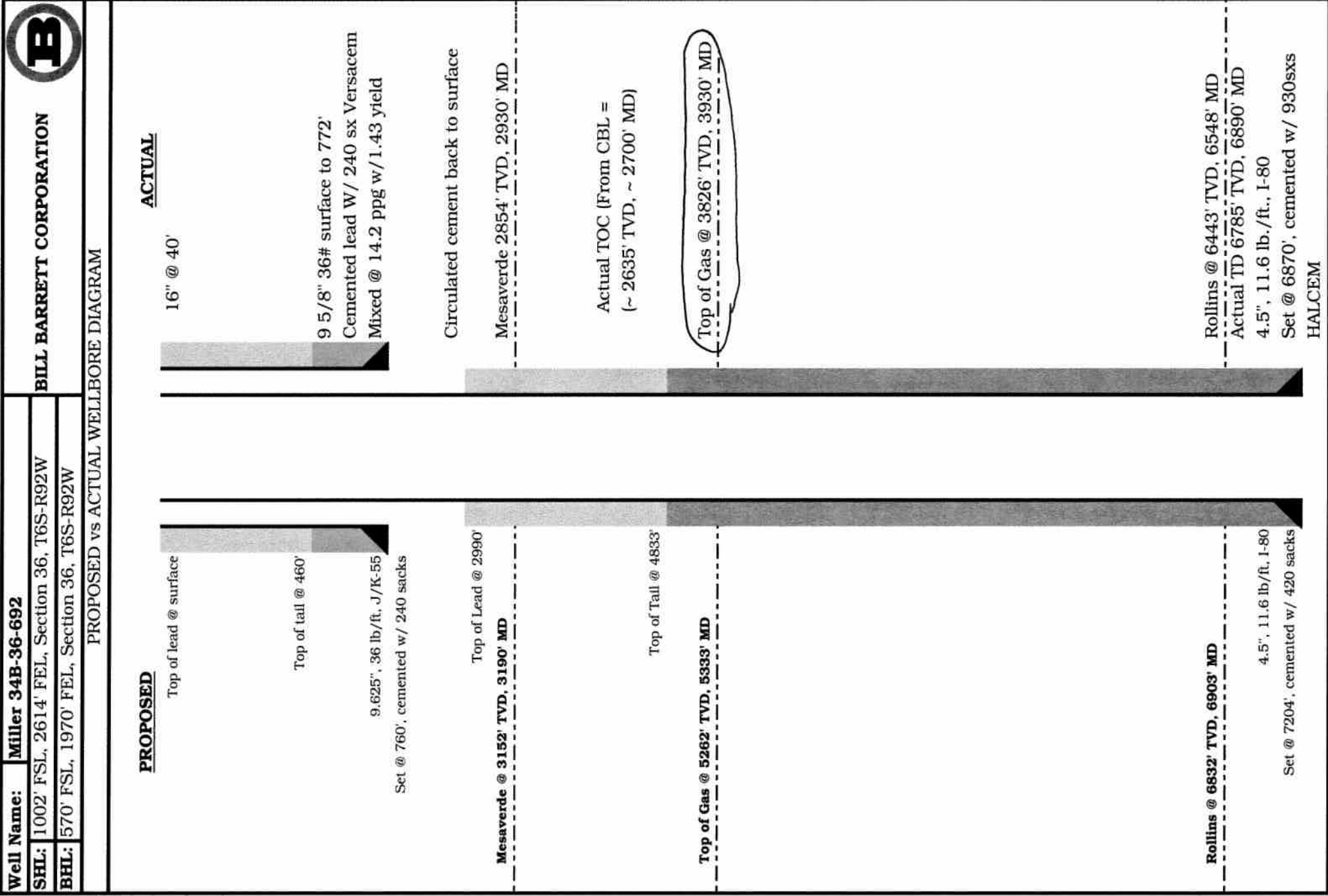
TEMPERATURE SURVEY

BRADENHEAD PRESSURE SUMMARY

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MAR 03 2010

COGCC/Rifle Office

BILL BARRETT CORPORATION
Bradenhead Pressure Summary



Well: Miller 34B-36-692
Pad: 34A-36-692
API No: 05-045-17731
Permit No: 20086386

Bradenhead Pressure Report Following Primary Cement Job

Date Cemented: 10/25/2009
Plug Bumped: 0200 hrs, 10/25/2009
WOC Time: 2 hrs.
Temp. Log Run: 0700 hrs, 10/25/2009
Casing Slips Set: 0400 hrs, 10/25/2009

Bradenhead Pressures

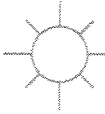
6 hrs:	15	psig
12 hrs:	60	psig
24 hrs:	70	psig
48 hrs:	150	psig
72 hrs:	0	psig

76C
2760'
K11

Comments:

Top of cement based on Temperature log: ~ 2,700' MD; Estimated Top of Gas: ~3,930' MD.

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Miller
34B-36-692
T6S R92W S36
05045177310000

