



FORM 4

State of Colorado

Rev 1205

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)984-2100 Fax: (303)984-2109

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.)

1. OGCC Operator Number: 10071

2. Name of Operator: Bill Barrett Corporation

3. Address: 1099 18th Street, Suite 2300  
City: Denver State: CO Zip: 80202

4. Contact Name: Elaine Winick  
Phone: (303) 312-8168  
Fax: (303) 291-0420

5. API Number: 05-045-19212

6. Well/Facility Name: GGU Federal

7. Well/Facility ID Number: 33C-28-691

8. Location (Qtr/Dir, Sec, Twp, Rng, Meridian): SENW, Sec. 28 T6S, R91W, 6th PM

9. County: Garfield

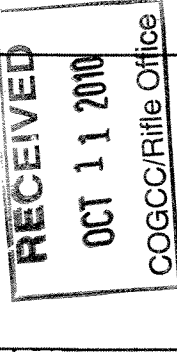
10. Field Name: Mamm Creek

11. Federal, Indian or State Lease Number: COC-41048

Complete the Attachment Checklist

OP OGCC

Survey Plat	
Directional Survey	
Surface Expm't Diagram	
Technical Info Page	X
Other	X



General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface aprt/r is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines: 

FNU/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/Dir, Sec, Twp, Rng, Mer: \_\_\_\_\_ Distance to nearest bldg, public rd, utility or RR \_\_\_\_\_

Latitude \_\_\_\_\_ Distance to nearest lease line \_\_\_\_\_ Is location in a High Density Area (rule 603b)? Yes/No \_\_\_\_\_

Longitude \_\_\_\_\_ Distance to nearest well same formation \_\_\_\_\_ Surface owner consultation date: \_\_\_\_\_

Ground Elevation \_\_\_\_\_

attach directional survey

GPS DATA: \_\_\_\_\_

Date of Measurement \_\_\_\_\_ PDOP Reading \_\_\_\_\_ Instrument Operator's Name \_\_\_\_\_

CHANGE SPACING UNIT

Formation	Formation Code	Spacing order number	Unit Acreage	Unit configuration
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Remove from surface bond  
Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling):

Effective Date: \_\_\_\_\_

Plugging Bond:  Blanket  Individual

CHANGE WELL NAME

From: \_\_\_\_\_

To: \_\_\_\_\_

Effective Date: \_\_\_\_\_

NUMBER

ABANDONED LOCATION:

Was location ever built? Yes  No

Is site ready for inspection? Yes  No

Date Ready for Inspection: \_\_\_\_\_

NOTICE OF CONTINUED SHUT IN STATUS

Date well shut in or temporarily abandoned: \_\_\_\_\_

Has Production Equipment been removed from site? Yes  No

MIT required if shut in longer than two years. Date of last MIT: \_\_\_\_\_

SPUD DATE: \_\_\_\_\_

REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK

Method used \_\_\_\_\_ Cementing tool setting/perf depth \_\_\_\_\_ Cement top \_\_\_\_\_ Cement bottom \_\_\_\_\_ Date \_\_\_\_\_

RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.

Final reclamation will commence on approximately \_\_\_\_\_

Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

Notice of Intent

Approximate Start Date: \_\_\_\_\_

Report of Work Done

Date Work Completed: \_\_\_\_\_

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

Intent to Recomplete (submit form 2)

Change Drilling Plans

Gross Interval Changed?

Casing/Cementing Program Change

Request to Vent or Flare

Repair Well

Rule 502 variance requested

Other: Request to Complete

E&P Waste Disposal

Beneficial Reuse of E&P Waste

Status Update/Change of Remediation Plans 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: Elaine Winick Date: 10-11-10 Email: ewinick@billbarrettcorp.com

Print Name: Elaine Winick Title: Permit Analyst

COGCC Approved: [Signature] Date: 10/20/2010

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED

OCT 11 2010

COGCC/Rifle Office

- 1. OGCC Operator Number: 10071 API Number: 05-045-19212
- 2. Name of Operator: Bill Barrett Corporation OGCC Facility ID #
- 3. Well/Facility Name: GGU Federal Well/Facility Number: 33C-28-691
- 4. Location (Qtr, Sec, Twp, Rng, Meridian): SENW, Sec. 28 T6S, R91W, 6th PM

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.

5. 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 → TOC @ 2825'  
 AS-BUILT WELLBORE SCHEMATIC → TOC 2800 (?)  
 TEMPERATURE SURVEY →  
 BRADENHEAD PRESSURE SUMMARY → all = 0.

TOC = 5400  
5413