

FORM  
4  
Rev 12/05

State of C



01241868



## Oil and Gas Conservation Commission

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

## 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.)

RECEIVED
DEC 16 2010
OGCC/Rifle Office
Complete the Attachment Checklist
OP OGCC

1. OGCC Operator Number: 10071	4. Contact Name: Brady Riley
2. Name of Operator: Bill Barrett Corporation	Phone: (303) 312-8115
3. Address: 1099 18th Street, Suite 2300	Fax: (303) 291-0420
City: Denver State: CO Zip: 80202	
5. API Number 05-045-19625	OGCC Facility ID Number
6. Well/Facility Name: GGU Swanson	7. Well/Facility Number: 32B-29-691
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NWSE, Sec. 29 T6S, R91W, 6th PM	
9. County: Garfield	10. Field Name: Mamm Creek
11. Federal, Indian or State Lease Number:	

Survey Plat	
Directional Survey	
Surface Eqmpt Diagram	
Technical Info Page	X
Other	X

## 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:	attach directional survey
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer	
Latitude	Distance to nearest property line
Longitude	Distance to nearest bldg, public rd, utility or RR
Ground Elevation	Distance to nearest lease line
	Is location in a High Density Area (rule 603b)? Yes/No
	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	Formation Code Spacing order number Unit Acreage Unit configuration
<input type="checkbox"/> Remove from surface bond	
Signed surface use agreement attached	
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME
Effective Date:	From:
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	To:
	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/perf depth Cement volume Cement top 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
	<input type="checkbox"/> E&P Waste Disposal
	<input type="checkbox"/> Beneficial Reuse of E&P Waste
	<input type="checkbox"/> 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: Brady Riley

Date: 11/17/10

Email: briley@billbarrettcorp.com

Print Name: Brady Riley

Title: Permit Analyst

COGCC Approved: [Signature]Title: EIT IIIDate: 12/20/10

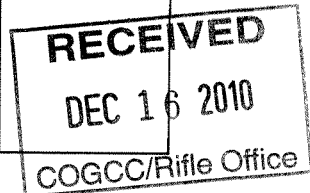
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number: 10071 API Number: 05-045-19625  
2. Name of Operator: Bill Barrett Corporation OGCC Facility ID #  
3. Well/Facility Name: GGU Swanson Well/Facility Number: 32B-29-691  
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSE, Sec. 29 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 → COGCC: TOC ≈ 2830'

AS-BUILT WELLBORE SCHEMATIC

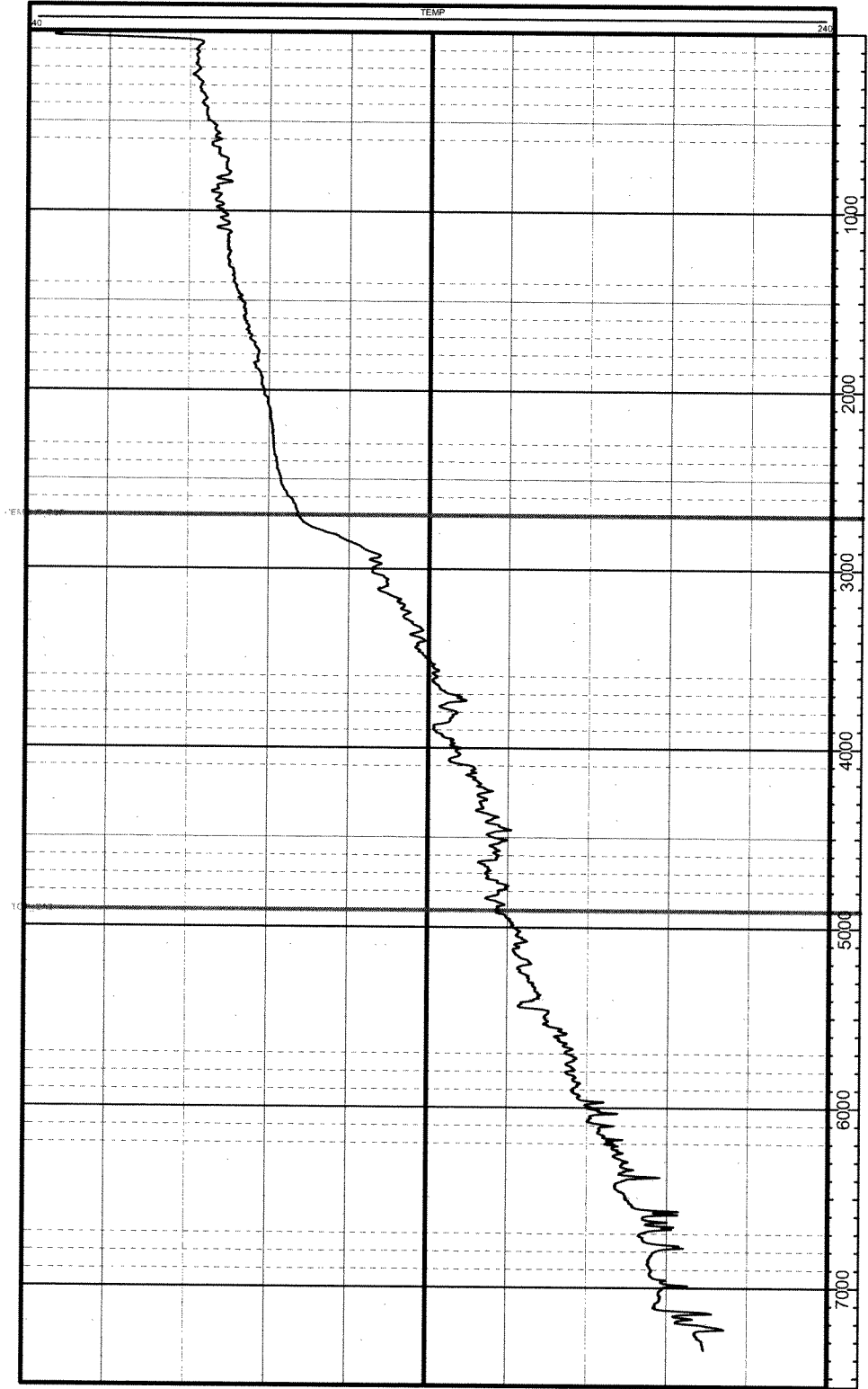
TEMPERATURE SURVEY → TOC = 2750' ±

BRADENHEAD PRESSURE SUMMARY

JSK 12/20/10

RECEIVED  
DEC 16 2010  
COGOC/Rifle Office

GGU Swanson  
32B-29-691  
T6S R91W S29  
05045196250000



HS=1

**BILL BARRETT CORPORATION**  
**Bradenhead Pressure Summary**



**Well:** GGU Swanson 32B-29-691  
**Pad:** MDP #15  
**API No:** 05-045-19625  
**Document No:** 400055457



**Bradenhead Pressure Report Following Primary Cement Job**

**Date Cemented:** 11/28/2010  
**Plug Bumped:** 2330 hrs, 11/28/2010

**Casing Slips Set:** 0600 hrs, 11/29/2010

**WOC Time:** 5 hrs  
**Temp. Log Run:** 0900 hrs, 11/29/2010

**Bradenhead Pressures**

<b>6 hrs:</b>	0	psig
<b>12 hrs:</b>	0	psig
<b>24 hrs:</b>	0	psig
<b>48 hrs:</b>	0	psig
<b>72 hrs:</b>	0	psig

**Comments:**

Top of cement based on Temperature log: ~2700' MD; Estimated Top of Gas: 4907' MD.

