

FORM  
5  
Rev  
02/08

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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DRILLING COMPLETION REPORT

Document Number:

2509138

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type  Final completion  Preliminary completion

1. OGCC Operator Number: 10071 4. Contact Name: ELAINE WINICK  
2. Name of Operator: BARRETT CORPORATION\* BILL Phone: (303) 312-8168  
3. Address: 1099 18TH ST STE 2300 Fax: (303) 291-0420  
City: DENVER State: CO Zip: 80202

5. API Number 05-045-18236-00 6. County: GARFIELD  
7. Well Name: GGU MILLER Well Number: 34C-31-691  
8. Location: QtrQtr: SWSE Section: 31 Township: 6S Range: 91W Meridian: 6  
Footage at surface: Distance: 539 feet Direction: FSL Distance: 2351 feet Direction: FEL  
As Drilled Latitude: 39.478371 As Drilled Longitude: -107.595273

GPS Data:

Data of Measurement: 04/22/2010 PDOP Reading: 6.0 GPS Instrument Operator's Name: J. KALMON

\*\* If directional footage

at Top of Prod. Zone Distance: 834 feet Direction: FSL Distance: 1986 feet Direction: FEL  
Sec: 31 Twp: 6S Rng: 92W  
at Bottom Hole Distance: 812 feet Direction: FSL Distance: 1989 feet Direction: FEL  
Sec: 31 Twp: 6S Rng: 92W

9. Field Name: MAMM CREEK 10. Field Number: 52500  
11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 09/15/2009 13. Date TD: 10/28/2009 14. Date Casing Set or D&A: 10/29/2009

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 7197 TVD 7162 17 Plug Back Total Depth MD 6879 TVD 6844

18. Elevations GR 6231 KB 6253

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

TRIPLE COMBO, TEMP LOG, CBL

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16		0	40		0	40	CALC
SURF	12+1/4	9+5/8		0	739	240	0	760	CALC
1ST	7+7/8	4+1/2			6,879	1,005	2,600	7,197	CBL

ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WILLIAMS FORK	3,199		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,887		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

THE 72 HOUR BRADENHEAD PRESSURE IS 0 PSIG.

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

Signed: \_\_\_\_\_ Print Name: ELAINE WINICK

Title: PERMIT ANALYST Date: 7/9/2010 Email: EWINICK@BILLBARRETTCORP.COM

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: *David S. Nashin* Director of COGCC Date: 2/24/2011

**Attachment Check List**

Att Doc Num	Name
2509138	FORM 5 SUBMITTED
2509139	CEMENT JOB SUMMARY
2509140	DIRECTIONAL SURVEY

Total Attach: 3 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	---HC CBL RECEIVED---	10/28/2010 11:58:55 AM
Permit	-ON HOLD-HC OF CBL----	10/21/2010 2:01:22 PM

Total: 2 comment(s)