

FORM 5A

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



DE ET OE ES

COMPLETED INTERVAL REPORT

Document Number:

400136096

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 10071
2. Name of Operator: BARRETT CORPORATION* BILL
3. Address: 1099 18TH ST STE 2300
City: DENVER State: CO Zip: 80202
4. Contact Name: Valerie Walker
Phone: (303) 312-8531
Fax: (303) 291-0420

5. API Number 05-045-19211-00
6. County: GARFIELD
7. Well Name: GGU FEDERAL
Well Number: 12D-28-691
8. Location: QtrQtr: SENW Section: 28 Township: 6S Range: 91W Meridian: 6
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: ROLLINS Status: PRODUCING
Treatment Date: 01/31/2011 Date of First Production this formation: 02/16/2011
Perforations Top: 7503 Bottom: 7612 No. Holes: 12 Hole size: 0.3
Provide a brief summary of the formation treatment: Open Hole:
Treated with Williams Fork, see Williams Fork treatment summary
This formation is commingled with another formation: [X] Yes [] No
Test Information:
Date: 02/23/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 66 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 66 Bbls H2O: 0 GOR:
Test Method: Flowing Casing PSI: 1300 Tubing PSI: 1180 Choke Size: 24/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1182 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6411 Tbg setting date: 02/15/2011 Packer Depth:
Reason for Non-Production:
Date formation Abandoned: Squeeze: [] Yes [] No If yes, number of sacks cmt
Bridge Plug Depth: Sacks cement on top:

FORMATION: WILLIAMS FORK Status: PRODUCING

Treatment Date: 01/31/2011 Date of First Production this formation: 02/16/2011

Perforations Top: 5179 Bottom: 7466 No. Holes: 168 Hole size: 0.3

Provide a brief summary of the formation treatment: Open Hole:

151,300 lbs CRC sand, 1,494,875 lbs White Sand, 75,744 bbls Slick water

This formation is commingled with another formation: Yes No

Test Information:

Date: 02/23/2011 Hours: 24 Bbls oil: 18 Mcf Gas: 1255 Bbls H2O: 145

Calculated 24 hour rate: Bbls oil: 18 Mcf Gas: 1255 Bbls H2O: 145 GOR: 69722

Test Method: Flowing Casing PSI: 1300 Tubing PSI: 1180 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1182 API Gravity Oil: 53

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6411 Tbg setting date: 02/15/2011 Packer Depth: _____

Reason for Non-Production:

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment:

Williams Fork treatment dates 1/31/2011 - 2/10/2011

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

Signed: _____ Print Name: Valerie A. Walker

Title: Permit Analyst Date: _____ Email vwalker@billbarrettcorp.com

Attachment Check List

Att Doc Num	Name

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User Group	Comment	Comment Date

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