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

DE	ET	OE	ES

Document Number:

2517216

DRILLING COMPLETION REPORT

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 [X] Final completion [ ] Preliminary 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: ELAINE WINICK
Phone: (303) 312-8168
Fax: (303) 291-0420

5. API Number 05-045-18581-00
6. County: GARFIELD
7. Well Name: CBS
Well Number: 13A-21-692
8. Location: QtrQtr: NWSW Section: 21 Township: 6S Range: 92W Meridian: 6
Footage at surface: Distance: 1971 feet Direction: FSL Distance: 1158 feet Direction: FWL
As Drilled Latitude: 39.510522 As Drilled Longitude: -107.676919

GPS Data:
Data of Measurement: 07/07/2010 PDOP Reading: 6.0 GPS Instrument Operator's Name: J. KALMON

** If directional footage
at Top of Prod. Zone Distance: 1480 feet Direction: FSL Distance: 669 feet Direction: FWL
Sec: 21 Twp: 6S Rng: 92W
at Bottom Hole Distance: 1469 feet Direction: FSL Distance: 675 feet Direction: FWL
Sec: 21 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) 03/13/2010 13. Date TD: 05/16/2010 14. Date Casing Set or D&A: 05/17/2010

15. Well Classification:
[ ] Dry [ ] Oil [X] Gas/Coalbed [ ] Disposal [ ] Stratigraphic [ ] Enhanced Recovery [ ] Storage [ ] Observation

16. Total Depth MD 7575 TVD 7511 17 Plug Back Total Depth MD 7531 TVD 7467

18. Elevations GR 5696 KB 5718

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:
CALIPER LOG, NEUTRON LOG, ARRAY INDUCTION, TRIPLE COMBO, TEMP LOG, MUD 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	792	240	0	815	CALC
1ST	7+7/8	4+1/2		0	7,567	540	4,450	7,575	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	3,562		☐	☐	THE 72 HR BRADENHEAD PRESSURE IS 0 PSIG.
ROLLINS	7,261		☐	☐	THE 72 HOUR BRADENHEAD PRESSURE IS 0 PSIG.

Comment:

THE 72 HR 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: 10/4/2010 Email: EWINICK@BILLBARRETTCORP.COM

Attachment Check List

Att Doc Num	Name
2517213	DIRECTIONAL SURVEY
2517214	CEMENT JOB SUMMARY
2517216	FORM 5 SUBMITTED

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)