

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



Table with 4 columns: DE, ET, OE, ES

Document Number: 400119100

COMPLETED INTERVAL REPORT

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 4. Contact Name: Brady Riley
2. Name of Operator: BARRETT CORPORATION\* BILL Phone: (303) 312-8115
3. Address: 1099 18TH ST STE 2300 Fax:
City: DENVER State: CO Zip: 80202

5. API Number 05-045-18316-00 6. County: GARFIELD
7. Well Name: SPECIALTY Well Number: 42D-28-692
8. Location: QtrQtr: NENE Section: 28 Township: 6S Range: 92W Meridian: 6
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: ROLLINS Status: PRODUCING
Treatment Date: 09/16/2010 Date of First Production this formation: 10/01/2010
Perforations Top: 7098 Bottom: 7216 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: 09/16/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 80 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 80 Bbls H2O: 0 GOR:
Test Method: flowing Casing PSI: 1500 Tubing PSI: 940 Choke Size: 24/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1130 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6217 Tbg setting date: 10/09/2010 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:

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

FORMATION: WILLIAMS FORK Status: PRODUCING

Treatment Date: 09/17/2010 Date of First Production this formation: 10/01/2010

Perforations Top: 5233 Bottom: 7067 No. Holes: 150 Hole size: 0.3

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

115268 lbs CRC Sand, 1082400 lbs White Sand, 62912 bbls Slickwater

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 10/15/2010 Hours: 24 Bbls oil: 6 Mcf Gas: 1520 Bbls H2O: 214

Calculated 24 hour rate: Bbls oil: 6 Mcf Gas: 1520 Bbls H2O: 214 GOR: 25333

Test Method: flowing Casing PSI: 1500 Tubing PSI: 940 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1130 API Gravity Oil: 47

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6217 Tbg setting date: 10/09/2010 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:

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

Signed: \_\_\_\_\_ Print Name: Brady Riley

Title: Permit Analyst Date: 12/27/2010 Email briley@billbarrettcorp.com

**Attachment Check List**

Att Doc Num	Name
400119100	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)