

FORM
5Rev
02/08State 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:

400160027

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 ☒ Final completion ☐ Preliminary 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: (303) 291-0420
City: DENVER State: CO Zip: 80202

5. API Number 05-045-19421-00 6. County: GARFIELD
7. Well Name: GGU MILLER FED Well Number: 33B-32-691
8. Location: QtrQtr: SESW Section: 32 Township: 6S Range: 91W Meridian: 6
Footage at surface: Distance: 1272 feet Direction: FSL Distance: 2301 feet Direction: FWL
As Drilled Latitude: 39.480555 As Drilled Longitude: -107.578816

GPS Data:

Data of Measurement: 01/07/2011 PDOP Reading: 6.0 GPS Instrument Operator's Name: James Kalmon

** If directional footage

at Top of Prod. Zone Distance: 1828 feet Direction: FSL Distance: 2041 feet Direction: FEL
Sec: 32 Twp: 6S Rng: 91W
at Bottom Hole Distance: 1858 feet Direction: FSL Distance: 2010 feet Direction: FEL
Sec: 32 Twp: 6S Rng: 91W

9. Field Name: MAMM CREEK 10. Field Number: 52500
11. Federal, Indian or State Lease Number: COC46972

12. Spud Date: (when the 1st bit hit the dirt) 10/07/2010 13. Date TD: 12/12/2010 14. Date Casing Set or D&A: 12/13/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 7405 TVD 7220 17 Plug Back Total Depth MD 7357 TVD 717218. Elevations GR 6119 KB 6142

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:

CBL, CALIPER, INDUCTION, DENSITY, TEMP, MUD

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	24	14		0	40		0	40	CALC
SURF	12+1/4	9+5/8	36	0	764	240	0	780	CALC
1ST	7+7/8	4+1/2	11.6	0	7,403	1,020	1,975	7,405	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	3,331		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,107		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

CONDUCTOR WAS CEMENTED WITH GROUT.
THE 72 HOUR BRADENHEAD PRESSURE TEST WAS 0 PSIG.
8-3/4" HOLE SIZE FROM BOTTOM OF SURFACE CASING TO 5038', THEN 7-7/8" TO TD.

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: _____ Email: briley@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: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name
400160034	DIRECTIONAL SURVEY
400160035	PDF-CALIPER
400160036	PDF-DENSITY
400160037	PDF-INDUCTION
400160038	PDF-TEMPERATURE
400160040	PDF-MUD
400160042	PDF-CEMENT BOND

Total Attach: 7 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)