

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:

400186815

## 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 05-045-18666-00 6. County: GARFIELD  
7. Well Name: MILLER Well Number: 33C-6-791  
8. Location: QtrQtr: NWSE Section: 6 Township: 7S Range: 91W Meridian: 6  
Footage at surface: Distance: 50 feet Direction: FNL Distance: 2394 feet Direction: FEL  
As Drilled Latitude: 39.476759 As Drilled Longitude: -107.594883

## GPS Data:

Data of Measurement: 02/23/2011 PDOP Reading: 6.0 GPS Instrument Operator's Name: T. Barnett

## \*\* If directional footage

at Top of Prod. Zone Distance: 515 feet Direction: FNL Distance: 2065 feet Direction: FEL  
Sec: 6 Twp: 7S Rng: 91W  
at Bottom Hole Distance: 503 feet Direction: FNL Distance: 2060 feet Direction: FEL  
Sec: 6 Twp: 7S Rng: 91W

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) 07/13/2010 13. Date TD: 01/21/2011 14. Date Casing Set or D&amp;A: 01/21/2011

## 15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7135 TVD 7088 17 Plug Back Total Depth MD 7083 TVD 7043

18. Elevations GR 6263 KB 6286

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, Triple Combo, Temperature

## 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	42	0	40	0	0	40	CALC
SURF	12+1/4	9+5/8	36	0	723	240	0	740	CALC
1ST	7+7/8	4+1/2	11.6	0	7,130	1,090	1,970	7,135	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	3,098		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,794		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

The 72 Hour Bradenhead Pressure Test was 0 psig. Conductor was set with grout.

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
400186815	FORM 5 SUBMITTED
400187036	PDF-CEMENT BOND
400187037	PDF-CALIPER
400187038	PDF-TRIPLE COMBINATION
400187039	PDF-TEMPERATURE
400187041	DIRECTIONAL SURVEY

Total Attach: 6 Files

### General Comments

User Group      Comment      Comment Date

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Total: 0 comment(s)