

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



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Document Number:

2590985

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: 10091 4. Contact Name: KALLASANDRA MORAN
 2. Name of Operator: BERRY PETROLEUM COMPANY Phone: (303) 999-4225
 3. Address: 1999 BROADWAY STE 3700 Fax: (303) 999-4325
 City: DENVER State: CO Zip: 80202

5. API Number 05-045-14973-00 6. County: GARFIELD
 7. Well Name: SCHOOL HOUSE POINT OM Well Number: 11D K15 696
 8. Location: QtrQtr: NESW Section: 15 Township: 6S Range: 96W Meridian: 6
 Footage at surface: Distance: 2370 feet Direction: FSL Distance: 2141 feet Direction: FWL
 As Drilled Latitude: 39.522292 As Drilled Longitude: -108.097137

GPS Data:
 Date of Measurement: 11/08/2007 PDOP Reading: 1.6 GPS Instrument Operator's Name: BEN JOHNSON

** If directional footage at Top of Prod. Zone Dist.: 1850 feet. Direction: FSL Dist.: 2470 feet. Direction: FWL
 Sec: 15 Twp: 6S Rng: 96W
 ** If directional footage at Bottom Hole Dist.: 1843 feet. Direction: FSL Dist.: 2480 feet. Direction: FWL
 Sec: 15 Twp: 6S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 06/01/2008 13. Date TD: 06/08/2008 14. Date Casing Set or D&A: _____

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

16. Total Depth MD 7816 TVD** 7783 17 Plug Back Total Depth MD 4850 TVD** 4829

18. Elevations GR 8476 KB 8498 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:
NO LOGS RUN

20. Casing, Liner and Cement:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	30	20	0	0	120	100	0	120	VISU
SURF	16	9+5/8	0	0	3,216	1,665	618	3,230	CALC
OPEN HOLE	8+3/4			0	7,816				

ADDITIONAL CEMENT

Cement work date: _____

Details of work: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
1 INCH	SURF	618	530	0	618

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	
GREEN RIVER	258		<input type="checkbox"/>	<input type="checkbox"/>	FISH IN HOL @ 5199'
WASATCH	2,538		<input type="checkbox"/>	<input type="checkbox"/>	
FORT UNION	5,343		<input type="checkbox"/>	<input type="checkbox"/>	
OHIO CREEK	6,953		<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FORK	7,436		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	9,776		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	10,276		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

THIS WELL DOES NOT HAVE PROD. CASING SET. FISH IN HOLE @ 5199'.

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

Signed: _____ Print Name: KALLASANDRA M MORAN

Title: PERMIT AGENT Date: 11/12/2010 Email: KMORAN@BRY-CONSULTANT

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2590986	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
2590985	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	SURFACE CASING CEMENT DETAIL FROM DOC # 1771455: LEAD 1565 SX + TAIL 100 SX + TOP OUR 530 SX = 2195 SX TOTAL	8/2/2011 1:25:20 PM
Permit	CMT FOR SURFACE CASING APPROVED IN CORRESPONDENCE BY DAVE ANDREWS, SEE DOC#1771455	8/2/2011 7:36:43 AM
Permit	"Data Entry Red Flag" cleared. Williams Fork top estimated at 7436' per KM. plg.	3/14/2011 11:53:07 AM
Permit	Requested Williams Fork top. plg.	3/10/2011 2:37:48 PM
Data Entry	"Data Entry Red Flag" UINTAH GROUP NOT IN LIST OF FORMATION NAMES, MEASURED DEPTH, TOP = 0 APROX.TOG NOT IN LIST OF FORMATION NAMES, MEASURED DEPTH, TOP = 7436	2/15/2011 10:16:10 AM

Total: 5 comment(s)