

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



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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.

Document Number:

400191636

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: Brady Riley
Phone: (303) 312-8115
Fax: _____

5. API Number 05-045-19795-00
6. County: GARFIELD
7. Well Name: GGU Federal Well Number: 41D-29-691
8. Location: QtrQtr: NENE Section: 29 Township: 6S Range: 91W Meridian: 6
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: ROLLINSStatus: PRODUCINGTreatment Date: 06/11/2011Date of First Production this formation: 06/30/2011Perforations Top: 7257 Bottom: 7356 No. Holes: 32 Hole size: 2 + 7/8

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: ☒ Yes ☐ No**Test Information:**Date: 07/11/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 70 Bbls H2O: 0Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 70 Bbls H2O: 0 GOR: Test Method: Flowing Casing PSI: 1075 Tubing PSI: 900 Choke Size: 24Gas Disposition: SOLD Gas Type: WET BTU Gas: 1165 API Gravity Oil: 52Tubing Size: 2 + 3/8 Tubing Setting Depth: 6023 Tbg setting date: 06/29/2011 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: FORMATION: WILLIAMS FORKStatus: PRODUCINGTreatment Date: 06/11/2011Date of First Production this formation: 06/30/2011Perforations Top: 4689 Bottom: 7214 No. Holes: 270 Hole size: 2 + 7/8

Provide a brief summary of the formation treatment:

Open Hole: ☐1,597,686 lbs White Sand, 395,600 lbs CRC Sand, 84,098 BBLS SlickwaterThis formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**Date: 07/11/2011 Hours: 24 Bbls oil: 6 Mcf Gas: 1333 Bbls H2O: 107Calculated 24 hour rate: Bbls oil: 6 Mcf Gas: 1333 Bbls H2O: 107 GOR: 22216Test Method: Flowing Casing PSI: 1075 Tubing PSI: 900 Choke Size: 24Gas Disposition: SOLD Gas Type: WET BTU Gas: 1165 API Gravity Oil: 52Tubing Size: 2 + 3/8 Tubing Setting Depth: 6023 Tbg setting date: 06/29/2011 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 RileyTitle: Permit Analyst Date: Email: briley@billbarrettcorp.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)