

FORM
5Rev
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



DE ET OE ES

Document Number:

400173353

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 05-045-18659-00

6. County: GARFIELD

7. Well Name: MILLER FEDERAL

Well Number: 24C-31-691

8. Location: QtrQtr: NWSE Section: 6 Township: 7S Range: 91W Meridian: 6

Footage at surface: Distance: 14 feet Direction: FNL Distance: 2426 feet Direction: FEL

As Drilled Latitude: 39.476856 As Drilled Longitude: -107.595062

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 Dist.: 827 feet. Direction: FSL Dist.: 2005 feet. Direction: FWL

Sec: 31 Twp: 6S Rng: 91W

** If directional footage at Bottom Hole Dist.: 812 feet. Direction: FSL Dist.: 2012 feet. Direction: FWL

Sec: 31 Twp: 6S Rng: 91W

9. Field Name: MAMM CREEK

10. Field Number: 52500

11. Federal, Indian or State Lease Number: COC 066576

12. Spud Date: (when the 1st bit hit the dirt) 07/15/2010 13. Date TD: 12/28/2010 14. Date Casing Set or D&A: 12/29/2010

15. Well Classification:

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

16. Total Depth MD 7470 TVD** 7159 17 Plug Back Total Depth MD 7414 TVD** 7103

18. Elevations GR 6261 KB 6284

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:

Logs Attached: Caliper, Mud, Triple Combo, Temperature, CBL; Array Induction

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

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	
MESAVERDE	3,411		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,163		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

The 72 hour Bradenhead Pressure Test was 0 psig. Conductor was set with grout. Ground and KB elevations were incorrect on the Preliminary report submitted and corrected on the Final Completion report.

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: 6/14/2011 Email: briley@billbarrettcorp.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Used GR and KB as reported on APD & Plat.	3/4/2011 9:56:35 AM

Total: 1 comment(s)