

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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Document Number:

400187051

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.

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:

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

9. Field Name: MAMM CREEK

Field Code: 52500

Completed Interval

FORMATION: ROLLINSStatus: PRODUCINGTreatment Date: 06/04/2011Date of First Production this formation: 06/14/2011Perforations Top: 6795 Bottom: 6892 No. Holes: 10 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: 06/28/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 22 Bbls H2O: 0Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 22 Bbls H2O: 0 GOR: 0Test Method: Flowing Casing PSI: 1700 Tubing PSI: 1250 Choke Size: 24Gas Disposition: SOLD Gas Type: WET BTU Gas: 1178 API Gravity Oil: 52Tubing Size: 2 + 3/8 Tubing Setting Depth: 5757 Tbg setting date: 06/16/2011 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: 06/04/2011Date of First Production this formation: 06/14/2011Perforations Top: 4607 Bottom: 6762 No. Holes: 204 Hole size: 2 + 7/8

Provide a brief summary of the formation treatment:

Open Hole: ☒1,397,461 lbs White Sand, 155,600 CRC Sand, 73,792 BBLS SlurryThis formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**Date: 06/28/2011 Hours: 24 Bbls oil: 8 Mcf Gas: 409 Bbls H2O: 45Calculated 24 hour rate: Bbls oil: 8 Mcf Gas: 409 Bbls H2O: 45 GOR: 51125Test Method: Flowing Casing PSI: 1700 Tubing PSI: 1250 Choke Size: 24Gas Disposition: SOLD Gas Type: WET BTU Gas: 1178 API Gravity Oil: 52Tubing Size: 2 + 3/8 Tubing Setting Depth: 5757 Tbg setting date: 06/16/2011 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: 7/19/2011 briley@billbarrettcorp.com

Email
:

Attachment Check List

Att Doc Num	Name
400187051	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)