

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



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Document Number:

400210870

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 05-045-19779-00 6. County: GARFIELD
 7. Well Name: CB-TG Land Well Number: 21B-20-692
 8. Location: QtrQtr: NWNE Section: 20 Township: 6S Range: 92W Meridian: 6
 Footage at surface: Distance: 689 feet Direction: FNL Distance: 2564 feet Direction: FEL
 As Drilled Latitude: 39.517590 As Drilled Longitude: -107.690208

GPS Data:

Data of Measurement: 04/14/2011 PDOP Reading: 6.0 GPS Instrument Operator's Name: T. Barnett

** If directional footage

at Top of Prod. Zone Distance: 828 feet Direction: FNL Distance: 1979 feet Direction: FWL
 Sec: 20 Twp: 6S Rng: 92W
 at Bottom Hole Distance: 830 feet Direction: FNL Distance: 1978 feet Direction: FWL
 Sec: 20 Twp: 6S Rng: 92W

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) 04/08/2011 13. Date TD: 06/04/2011 14. Date Casing Set or D&A: 06/04/2011

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation
16. Total Depth MD 7640 TVD 7562 17 Plug Back Total Depth MD 7592 TVD 751418. Elevations GR 5530 KB 5553

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, Temperature, Triple Combo

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	24	14	36	0	40		0	40	CALC
SURF	12+1/4	9+5/8	36	0	795	240	0	818	CALC
1ST	7+7/8	4+1/2	11.6	0	7,639	560	4,350	7,640	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	3,672		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,332		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

The 72 Hour Bradenhead Pressure Test was 0 psig. Conductor was set with grout. 8 3/4 hole size was used to drill from the bottom of surface casing to 4712' then 7 7/8 hole size was drilled to TD.

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
400210871	PDF-TEMPERATURE
400210872	PDF-CEMENT BOND
400210873	PDF-CALIPER
400210874	PDF-TRIPLE COMBINATION
400210875	DIRECTIONAL SURVEY
400210876	FORM 5 SUBMITTED

Total Attach: 6 Files

General Comments

User Group Comment Comment Date

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Total: 0 comment(s)