

**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

Document Number:

400227211

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: <u>10071</u>	4. Contact Name: <u>Brady Riley</u>
2. Name of Operator: <u>BARRETT CORPORATION* BILL</u>	Phone: <u>(303) 312-8115</u>
3. Address: <u>1099 18TH ST STE 2300</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-045-19679-00</u>	6. County: <u>GARFIELD</u>
7. Well Name: <u>Jolley</u>	Well Number: <u>42B-20-691</u>
8. Location: QtrQtr: <u>NWSE</u> Section: <u>20</u> Township: <u>6S</u> Range: <u>91W</u> Meridian: <u>6</u>	
9. Field Name: <u>MAMM CREEK</u> Field Code: <u>52500</u>	

Completed Interval

FORMATION: ROLLINS Status: PRODUCING

Treatment Date: 10/14/2011 Date of First Production this formation: 11/01/2011

Perforations Top: 7569 Bottom: 7637 No. Holes: 21 Hole size: 0.34

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: 11/22/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 30 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 30 Bbls H2O: 0 GOR: 0

Test Method: Flowing Casing PSI: 700 Tubing PSI: 500 Choke Size: 30/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1100 API Gravity Oil: 52

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6503 Tbg setting date: 10/28/2011 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 FORK Status: PRODUCING

Treatment Date: 10/14/2011 Date of First Production this formation: 11/01/2011

Perforations Top: 5345 Bottom: 7511 No. Holes: 217 Hole size: 0.34

Provide a brief summary of the formation treatment: _____ Open Hole:

152,736 lbs 30/50 White Sand, 998,897 lbs 20/40 White Sand, 142,077 lbs CRC Sand, 64,723 BBLs Slurry

This formation is commingled with another formation: Yes No

Test Information:

Date: 11/22/2011 Hours: 24 Bbls oil: 18 Mcf Gas: 568 Bbls H2O: 125

Calculated 24 hour rate: Bbls oil: 18 Mcf Gas: 568 Bbls H2O: 125 GOR: 31556

Test Method: Flowing Casing PSI: 700 Tubing PSI: 500 Choke Size: 30/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1100 API Gravity Oil: 52

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6503 Tbg setting date: 10/28/2011 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 Riley

Title: Permit Analyst Date: 11/29/2011 briley@billbarrettcorp.com

Email
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Attachment Check List

Att Doc Num	Name
400227211	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date
Permit	off hold--form 5 doc #400223669 rec'd. WBD attached to form 4 doc #2577815 submitted 10/07/2011.	12/6/2011 10:49:09 AM
Permit	on hold--req'd form 5 from oper. w/ surf. cmt. summ.	11/30/2011 3:10:15 PM

Total: 2 comment(s)