

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



Table with 4 columns: DE, ET, OE, ES

Document Number: 400244943

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
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 05-123-24059-00
6. County: WELD
7. Well Name: 70 RANCH
Well Number: CSE-20
8. Location: QtrQtr: NESE Section: 20 Township: 5N Range: 63W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 01/18/2012 Date of First Production this formation: 07/23/2007

Perforations Top: 6264 Bottom: 6530 No. Holes: 112 Hole size: 38/100

Provide a brief summary of the formation treatment: Open Hole: []

Refrac treatment: 2000 gals of 15% HCl; 3739 bbls 3% KCl Water; 251,960 lbs. White Sand 20/40; 36,500 lbs. Sand 100 Mesh

This formation is commingled with another formation: [] Yes [X] No

Test Information:

Date: 01/18/2012 Hours: 24 Bbls oil: 99 Mcf Gas: 214 Bbls H2O: 203

Calculated 24 hour rate: Bbls oil: 99 Mcf Gas: 214 Bbls H2O: 203 GOR: 21

Test Method: flowing Casing PSI: 210 Tubing PSI: 200 Choke Size: 64/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1 API Gravity Oil: 52

Tubing Size: Tubing Setting Depth: Tbg setting date: 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: This is a revised 5A; BBC re-frac'd within the existing perforations of these formations.

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: 1/24/2012 Email: briley@billbarrettcorp.com

Attachment Check List

Att Doc Num	Name
400244943	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)