



02121393

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FORM
4
Rev 1205State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)694-2100 Fax: (303)694-2100



SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form). Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

RECEIVED
FEB 23 2012
COGCC/Rifle Office

1. OGCC Operator Number: 10071		4. Contact Name: Mary Pobuda		Complete the Attachment Checklist OP OGCC
2. Name of Operator: Bill Barrett Corporation		Phone: 303-312-8511		
3. Address: 1099 18th Street, Ste. 2300 City: Denver State: CO Zip: 80202		Fax: 303-291-0420		
5. API Number: 05-Q45-20127		OGCC Facility ID Number		Survey Plat
6. Well/Facility Name: CBS		7. Well/Facility Number: 32D-21-692		Directional Survey
8. Location (Qtr/Sec, Twp, Rng, Meridian): SWNE Sec. 21 T6S, R92W 6th PM				Surface Egmt Diagram
9. County: Garfield		10. Field Name: Mamn Creek		Technical Info Page
11. Federal, Indian or State Lease Number:				Other

General Notice

☐ CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines: ☐ PNL/FBL ☐ FEL/FWL

Change of Surface Footage to Exterior Section Lines: ☐ ☐ ☐ ☐

Change of Bottomhole Footage from Exterior Section Lines: ☐ ☐ ☐ ☐

Change of Bottomhole Footage to Exterior Section Lines: ☐ ☐ ☐ ☐ attach directional survey

Bottomhole location Qtr/Sec, Twp, Rng, Mer: _____

Latitude: _____ Distance to nearest property line: _____ Distance to nearest bldg, public rd, utility or RR: _____

Longitude: _____ Distance to nearest lease line: _____ Is location in a High Density Area (rule 603b)? Yes/No: _____

Ground Elevation: _____ Distance to nearest well same formation: _____ Surface owner consultation date: _____

GPS DATA:
Date of Measurement: _____ PDOP Reading: _____ Instrument Operator's Name: _____

☐ CHANGE SPACING UNIT
Formation: _____ Formation Code: _____ Spacing order number: _____ Unit Acreage: _____ Unit configuration: _____

☐ Remove from surface bond
Signed surface use agreement attached: _____

☐ CHANGE OF OPERATOR (prior to drilling):
Effective Date: _____
Plugging Bond: ☐ Blanket ☐ Individual

☐ CHANGE WELL NAME: _____ NUMBER: _____
From: _____
To: _____
Effective Date: _____

☐ ABANDONED LOCATION:
Was location ever built? ☐ Yes ☐ No
Is site ready for inspection? ☐ Yes ☐ No
Date Ready for inspection: _____

☐ NOTICE OF CONTINUED SHUT IN STATUS
Date well shut in or temporarily abandoned: _____
Has Production Equipment been removed from site? ☐ Yes ☐ No
MIT required if shut in longer than two years. Date of last MIT: _____

☐ SPUD DATE: _____ ☐ REQUEST FOR CONFIDENTIAL STATUS (if more from date casing set)

☐ SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK
Method used: _____ Cementing tool setting/perf depth: _____ Cement volume: _____ Cement top: _____ Cement bottom: _____ Date: _____
*submit cbl and cement job summaries

☐ RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.
Final reclamation will commence on approximately: _____ ☐ Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

☒ Notice of Intent
Approximate Start Date: 2/27/12

☐ Report of Work Done
Date Work Completed: _____

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flame	<input type="checkbox"/> EAP Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of EAP Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Request to Complete	for Spills and Releases

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: Mary Pobuda Date: 2/22/12 Email: mpobuda@billbarrettcorp.com
Print Name: Mary Pobuda Title: Permit AnalystCOGCC Approved: NWAE Title: NWAE Date: 2/23/12
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

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1. OGCC Operator Number: 10071 API Number: 05-045-20127
2. Name of Operator: Bill Barrett Corporation OGCC Facility ID #
3. Well/Facility Name: CBS Well/Facility Number: 32D-21-692
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNE Sec. 21 T6S, R92W 6th PM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

The referenced well has been successfully cemented according to the approved plan and a summary of the Bradenhead monitoring.

Bill Barrett Corporation requests approval to commence completion operations.

Attachments:

CBL
AS-BUILT WELLBORE SCHEMATIC
TEMPERATURE SURVEY
BRADENHEAD PRESSURE SUMMARY

COGCC TOC = 4650'

Well Name: CBS 32D-21-692		HILL BARRETT CORPORATION	
SHL: SWNE Sec. 21 T6S R92W 6th PM	<div style="display: flex; justify-content: space-between;"> date updated 2/22/2012 updated by Mary Pobuda </div>		
05-045-20127		AS DRILLED	

Top of lead & surface

9.625", 36 lbs/ft, J-55

12-1/4" Hole

SPUD 11/12/2011

TD 12/28/2011

set @ 805

Drilled 8 3/4" hole from base surface casing to 5461 MD then drilled 7 7/8" hole to TD

Measure 3736 MD 3700 TVD

Top of Gas 5478 MD 5427 TVD

Top of tail cement @ 4620 MD 4574 TVD

Cementing Program:

Surface:

Lead: 120 sks

Tail: 120 sks

Production:

Tail: 602 sks

Rollins 7426 MD 7375 TVD

TD 7765 MD 7714 TVD

4.5", 11.6 lbs/ft, E-80

NOT TO SCALE

set @ 7736 MD

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FEB 28 2012

COGCC/Rifle Office



BILL BARRETT CORPORATION
Bradenhead Pressure Summary

Well: CBS 32D-21-692
Pad: Circle B Land Tract 5
API No: 05-045-20127
Document No: 400070182

Bradenhead Pressure Report Following Primary Cement Job

Date Cemented: 12/29/2011
Plug Bumped: 12/29/2011 @ 20:00

Casing Slips Set: 12/29/2011 @ 22:00

WOC Time: 5+hrs
Temp. Log Run: 12/30/2011 @ 02:00

Bradenhead Pressures

6 hrs:	0	psig
12 hrs:	0	psig
24 hrs:	0	psig
48 hrs:	0	psig
72 hrs:	0	psig

Comments:

Top of cement based on Temperature log: ~4620' MD; Estimated Top of Gas: 5478' MD.

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CMS
320-21-482
TWS RZ21V B21
03045201270000

