

**FORM  
5**Rev  
02/08**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400382746

Date Received:

**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: Mary Pobuda

2. Name of Operator: BARRETT CORPORATION\* BILL

Phone: (303) 312-8511

3. Address: 1099 18TH ST STE 2300

Fax: (303) 291-0420

City: DENVER State: CO Zip: 80202

5. API Number 05-123-33588-00

6. County: WELD

7. Well Name: Dutch Lake

Well Number: 11-13H

8. Location: QtrQtr: NWNW Section: 13 Township: 6N Range: 62W Meridian: 6

Footage at surface: Distance: 501 feet Direction: FNL Distance: 500 feet Direction: FWL

As Drilled Latitude: 40.493094 As Drilled Longitude: -104.278100

## GPS Data:

Data of Measurement: 01/08/2013 PDOP Reading: 2.6 GPS Instrument Operator's Name: Zane Bullard

\*\* If directional footage at Top of Prod. Zone Dist.: 908 feet. Direction: FNL Dist.: 678 feet. Direction: FWL

Sec: 13 Twp: 6N Rng: 62W

\*\* If directional footage at Bottom Hole Dist.: 607 feet. Direction: FSL Dist.: 704 feet. Direction: FWL

Sec: 13 Twp: 6N Rng: 62W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 10/26/2012 13. Date TD: 11/21/2012 14. Date Casing Set or D&amp;A: 11/21/2012

## 15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 10515 TVD\*\* 6317 17 Plug Back Total Depth MD 10454 TVD\*\* 6313

18. Elevations GR 4692 KB 4716

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, Mud, Gamma, Caliper, Density &amp; TripleCombo (Quicklook).

## 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	16	42	0	80		0	102	CALC
SURF	13+1/2	9+5/8	36	0	854	380	0	882	CALC
1ST	8+3/4	7	26	0	6,781	640	600	6,790	CALC
1ST LINER	6+1/8	4+1/2	11.6	5679	10,500				

### STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

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	
SUSSEX	4,217		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,827		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	6,223		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,314		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Please note that the as-drilled SHL footages have been updated on this form 5 to reflect the actual location. The as built location plat from the surveyor is attached.

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

Signed: \_\_\_\_\_

Print Name: Mary Pobuda

Title: Permit Analyst

Date:

Email: mpobuda@billbarrettcorp.com

### Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400382843	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400382842	Directional Survey **	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<u>Other Attachments</u>		
400382797	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400382798	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400382844	PDF-CALIPER	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400382850	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400382856	PDF-DENSITY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400382858	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400382864	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400382865	PLAT	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400383244	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### General Comments

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

Total: 0 comment(s)