

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



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Document Number:

400574640

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: Venessa Langmacher

2. Name of Operator: BARRETT CORPORATION\* BILL

Phone: (303) 312-8172

3. Address: 1099 18TH ST STE 2300

Fax: (303) 291-0420

City: DENVER State: CO Zip: 80202

5. API Number 05-123-37710-00

6. County: WELD

7. Well Name: Merritt

Well Number: 6-66-9-0659BH

8. Location: QtrQtr: NWNE Section: 9 Township: 6N Range: 66W Meridian: 6

Footage at surface: Distance: 260 feet Direction: FNL Distance: 2110 feet Direction: FEL

As Drilled Latitude: 40.509320 As Drilled Longitude: -104.781030

## GPS Data:

Data of Measurement: 02/26/2014 PDOP Reading: 3.8 GPS Instrument Operator's Name: Mark Angell

\*\* If directional footage at Top of Prod. Zone Dist.: 627 feet. Direction: FNL Dist.: 1851 feet. Direction: FEL

Sec: 9 Twp: 6N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 514 feet. Direction: FSL Dist.: 1785 feet. Direction: FEL

Sec: 9 Twp: 6N Rng: 66W

9. Field Name: EATON

10. Field Number: 19350

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 08/18/2013 13. Date TD: 10/03/2013 14. Date Casing Set or D&amp;A: 10/03/2013

## 15. Well Classification:

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

16. Total Depth MD 11635 TVD\*\* 7075 17 Plug Back Total Depth MD 11635 TVD\*\* 7075

18. Elevations GR 4822 KB 4844

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:

GR, Mud, CBL

## 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	65	0	82	50	0	82	CALC
SURF	13+1/2	9+5/8	36	0	816	425	0	816	CALC
1ST	8+3/4	7	26	0	7,430	685	3,742	7,430	CALC
1ST LINER	6+1/8	4+1/2	11.6	6421	11,635				

### 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	
SHANNON	4,867		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	6,909		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,025		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: \_\_\_\_\_ Print Name: Venessa Langmacher

Title: Sr Permit Analyst Date: \_\_\_\_\_ Email: vlangmacher@billbarrettcorp.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400574958	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400574957	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>					
400574924	LAS-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574927	PDF-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574928	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574934	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574955	PDF-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574960	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400575112	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400575132	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

## General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)