

FORM 5A

Rev 06/12

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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Date Received:

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 4. Contact Name: Christina Hirtler
 2. Name of Operator: BARRETT CORPORATION* BILL Phone: (303) 312-8597
 3. Address: 1099 18TH ST STE 2300 Fax: (303) 291-0420
 City: DENVER State: CO Zip: 80202 Email: chirtler@billbarrettcorp.com

5. API Number 05-123-37714-00 6. County: WELD
 7. Well Name: Circle B Well Number: 6-66-9-0164CH
 8. Location: QtrQtr: NENW Section: 9 Township: 6N Range: 66W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/09/2014 End Date: 05/10/2014 Date of First Production this formation: 05/28/2014

Perforations Top: 7802 Bottom: 11895 No. Holes: 648 Hole size: 44/100

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

24 stage frac. 349,005 lbs of 40/70 sand, 3,548,580 lbs of 20/40 sand, 20,433 bbls of Slickwater

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 58116 Max pressure during treatment (psi): 6789

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.83

Total acid used in treatment (bbl): 0 Number of staged intervals: 24

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 2112

Fresh water used in treatment (bbl): 58116 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 3897585 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/09/2014 Hours: 24 Bbl oil: 322 Mcf Gas: 218 Bbl H2O: 101

Calculated 24 hour rate: Bbl oil: 322 Mcf Gas: 218 Bbl H2O: 101 GOR: _____

Test Method: Flowing Casing PSI: 950 Tubing PSI: 0 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1370 API Gravity Oil: 46

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: _____ ** Wireline and Cement Job Summary must be attached.

Comment:

No tubing has been set at this time

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

Signed: _____ Print Name: Chritina Hirtler

Title: Permit Analyst Date: _____ Email: chirtler@billbarrettcorp.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400633679	WELLBORE DIAGRAM
400634173	CEMENT JOB SUMMARY

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)