

FORM  
5

Rev  
09/14

State of Colorado  
Oil and Gas Conservation Commission

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



Document Number:

400422119

Date Received:

06/03/2013

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type  Final completion  Preliminary completion

OGCC Operator Number: 10071 Contact Name: Mary Pobuda  
Name of Operator: BARRETT CORPORATION\* BILL Phone: (303) 312-8511  
Address: 1099 18TH ST STE 2300 Fax: (303) 291-0420  
City: DENVER State: CO Zip: 80202

API Number 05-123-33406-00 County: WELD  
Well Name: Dutch Lake Well Number: 17-25H  
Location: QtrQtr: NWNW Section: 25 Township: 6N Range: 62W Meridian: 6  
Footage at surface: Distance: 501 feet Direction: FNL Distance: 501 feet Direction: FWL  
As Drilled Latitude: 40.464536 As Drilled Longitude: -104.278825

GPS Data:  
Date of Measurement: 05/30/2013 PDOP Reading: 1.7 GPS Instrument Operator's Name: Dallas Nielsen

\*\* If directional footage at Top of Prod. Zone Dist.: 752 feet Direction: FNL Dist.: 669 feet Direction: FWL  
Sec: 25 Twp: 6N Rng: 62W

\*\* If directional footage at Bottom Hole Dist.: 560 feet Direction: FSL Dist.: 545 feet Direction: FWL  
Sec: 25 Twp: 6N Rng: 62W

Field Name: WILDCAT Field Number: 99999  
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/03/2013 Date TD: 04/16/2013 Date Casing Set or D&A: 04/12/2013  
Rig Release Date: Per Rule 308A.b.

Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD 10651 TVD\*\* 6223 Plug Back Total Depth MD 10651 TVD\*\* 6223

Elevations GR 4671 KB 4686 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:  
CBL, Mud, Gamma Ray

CASING, LINER AND CEMENT

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	60		0	60	CALC
SURF	13+1/2	9+5/8	36	0	836	452	0	850	VISU
1ST	8+3/4	7	23	0	6,678	600	1,258	6,690	CBL
1ST LINER	6+1/8	4+1/2	11.6	5630	10,646				

**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:

\_\_\_\_\_

**FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
SUSSEX	4,240				
SHANNON	4,725				
SHARON SPRINGS	6,295				
NIOBRARA	6,459				

Operator Comments

\_\_\_\_\_

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: 6/3/2013 Email: mpobuda@billbarrettcorp.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400428028	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400428026	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>			
40122119	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400422119	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400427980	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400428004	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400826885	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402422119	GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
410422119	MUD LOG	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
420422119	MUD LOG	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
430422119	MUD LOG	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
440422119	MUD LOG	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	liner top changed per CBL.	4/23/2015 6:33:39 PM
Permit	Contacted Operator in regards to the following: 1. The attached directional data is corrupted and cannot be opened. 2. Mud logs are not attached.	4/17/2015 9:32:03 AM

Total: 2 comment(s)