

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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Document Number: 400813935

Date Received: 04/20/2015

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: Brady Riley
 2. Name of Operator: BARRETT CORPORATION* BILL Phone: (303) 312-8115
 3. Address: 1099 18TH ST STE 2300 Fax: _____
 City: DENVER State: CO Zip: 80202 Email: briley@billbarrettcorp.com

5. API Number 05-123-39090-00 6. County: WELD
 7. Well Name: Anschutz Equus Farms Well Number: 4-62-16-0857BH
 8. Location: QtrQtr: NENE Section: 16 Township: 4N Range: 62W Meridian: 6
 9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/08/2015 End Date: 02/21/2015 Date of First Production this formation: 03/30/2015
 Perforations Top: 6495 Bottom: 10557 No. Holes: 900 Hole size: 37/100

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

25 STAGES FRAC WITH 361,000 LBS OF 40/70 SAND AND 4,584,000 LBS OF 20/40 SAND, 393BBLS OF 15% HCL ACID AND 86,061 BBLS TOTAL FLUID

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 86061 Max pressure during treatment (psi): 8328
 Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.34
 Type of gas used in treatment: _____ Min frac gradient (psi/ft): 1.00
 Total acid used in treatment (bbl): 393 Number of staged intervals: 25
 Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): 6879
 Fresh water used in treatment (bbl): 86061 Disposition method for flowback: DISPOSAL
 Total proppant used (lbs): 4945000 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/19/2015 Hours: 24 Bbl oil: 166 Mcf Gas: 40 Bbl H2O: 206
 Calculated 24 hour rate: Bbl oil: 166 Mcf Gas: 40 Bbl H2O: 206 GOR: 238
 Test Method: flowing Casing PSI: 858 Tubing PSI: 489 Choke Size: 15/64
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 40 API Gravity Oil: 39
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 6233 Tbg setting date: 03/04/2015 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:

BBC SUBMITTED THIS 5A ON 4/20/2015 AND HAD COGCC RETURN TO DRAFT TO UPDATE FRAC SUMMARY.

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

Signed: _____ Print Name: Brady Riley

Title: Permit Analyst Date: 4/20/2015 Email: briley@billbarrettcorp.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400813935	FORM 5A SUBMITTED
400813936	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Return to draft per operator request.	6/8/2015 11:23:28 AM

Total: 1 comment(s)