

FORM
5Rev
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



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Document Number:

400676219

Date Received:

09/02/2014

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

OGCC Operator Number: 10071

Contact Name: Christina Hirtler

Name of Operator: BARRETT CORPORATION* BILL

Phone: (303) 312-8597

Address: 1099 18TH ST STE 2300

Fax: (303) 291-0420

City: DENVER State: CO Zip: 80202

API Number 05-123-38964-00

County: WELD

Well Name: Anschutz State

Well Number: 4-62-2-3228CH2

Location: QtrQtr: SWNW Section: 2 Township: 4N Range: 62W Meridian: 6

Footage at surface: Distance: 1644 feet Direction: FNL Distance: 250 feet Direction: FWL

As Drilled Latitude: 40.344619 As Drilled Longitude: -104.301711

GPS Data:

Date of Measurement: 04/09/2014 PDOP Reading: 2.1 GPS Instrument Operator's Name: Loren Shanks

** If directional footage at Top of Prod. Zone Dist.: 2392 feet. Direction: FNL Dist.: 652 feet. Direction: FWL

Sec: 2 Twp: 4N Rng: 62W

** If directional footage at Bottom Hole Dist.: 2490 feet. Direction: FNL Dist.: 2522 feet. Direction: FEL

Sec: 1 Twp: 4N Rng: 62W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number: 99339

Spud Date: (when the 1st bit hit the dirt) 03/20/2014 Date TD: 06/06/2014 Date Casing Set or D&A: 06/08/2014

Rig Release Date: Per Rule 308A.b.

Well Classification:

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

Total Depth MD 14275 TVD** 6139 Plug Back Total Depth MD 14221 TVD** 6085

Elevations GR 4544 KB 4566 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

MWD, CBL, MUD, GYRO

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
SURF	13+1/2	9+5/5	36	0	830	356	0	832	CALC
1ST	8+3/4	7	26	22	6,497	575	1,232	6,510	CBL
1ST LINER	6+1/8	4+1/2	11.6	5627	14,265				

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	
SHANNON	5,060				
SHARON SPRINGS	5,959				
NIOBRARA	6,090				

Comment:

No Conduction casing was set
Open hole log was run on Anschutz State 4-62-2-1721BH api# 123-38961 per rule 317.o and will be reported on the form 5.

BBC REVISED THIS FORM 7/15/15 PER COGCC REQUEST. FORM WAS ORIGINALLY SUBMITTED 9/2/14.

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

Signed: _____ Print Name: Christina Hirtler

Title: Permit Analyst Date: 9/2/2014 Email: chirtler@billbarrettcorp.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400676364	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400676354	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>					
400676219	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676287	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676288	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676306	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676308	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676312	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676323	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676324	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676328	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676331	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676344	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400676358	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400677211	PDF-GYRO SURVEY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400868273	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Missing directional data. Return to draft.	7/14/2015 8:52:16 AM

Total: 1 comment(s)