

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



DE	ET	OE	ES
----	----	----	----

Document Number:

401300317

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  
2. Name of Operator: BARRETT CORPORATION\* BILL  
3. Address: 1099 18TH ST STE 2300  
City: DENVER State: CO Zip: 80202  
4. Contact Name: BRADY RILEY  
Phone: (303) 3128115  
Fax:  
Email: BRILEY@BILLBARRETTCORP.COM

5. API Number 05-123-39316-00  
6. County: WELD  
7. Well Name: Ruh  
Well Number: 6-62-11-0758B2  
8. Location: QtrQtr: NWNE Section: 11 Township: 6N Range: 62W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION  
Treatment Date: 03/19/2017 End Date: 05/01/2017 Date of First Production this formation: 05/26/2017  
Perforations Top: 6761 Bottom: 15972 No. Holes: 2772 Hole size: 37/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

77 STAGE FRAC WITH 3,987,140 LBS OF LBS 20/40 SAND, 434,008 LBS 100# MESH, 48,048 BBLS FRESH WATER, 274 BBLS 15% HCL ACID, AND 48,322 BBLS TOTAL FLUID (ACID+FRESH WATER)

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 48322 Max pressure during treatment (psi): 8153  
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): 0.87  
Total acid used in treatment (bbl): 274 Number of staged intervals: 77  
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 15425  
Fresh water used in treatment (bbl): 48048 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 4421148 Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/25/2017 Hours: 24 Bbl oil: 74 Mcf Gas: 54 Bbl H2O: 346  
Calculated 24 hour rate: Bbl oil: 74 Mcf Gas: 54 Bbl H2O: 346 GOR: 441  
Test Method: FLOWING Casing PSI: 1020 Tubing PSI: 520 Choke Size: 11/64  
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1632 API Gravity Oil: 36  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6517 Tbg setting date: 05/14/2017 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:

DUE TO A DELAY IN THE COMPLETIONS SCHEDULE FOR THIS WELL, THE TOPZ SUBMITTED WITH THE FINAL FORM 5 WERE ESTIMATES (SEE ATTACHED CORRESPONDENCE FOR DETAILS AND SUBMITTED FINAL FORM 5). BBC ACTUAL TOPZ IS 6761 FEET, SAME AS REPORTED ON THE FINAL FORM 5 AS WE WERE ABLE TO FOLLOW OUR FRAC DESIGN SO NO CHANGE IS NEEDED TO THE TOPZ FOOTAGES

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: \_\_\_\_\_

Email : BRILEY@BILLBARRETTCORP.COM

### Attachment Check List

**Att Doc Num**      **Name**

401300323	WELLBORE DIAGRAM
401300324	CORRESPONDENCE

Total Attach: 2 Files

### General Comments

**User Group**      **Comment**

**Comment Date**

		Stamp Upon Approval
--	--	------------------------

Total: 0 comment(s)