



02053461



DE ET OE ES

RECEIVED

FEB 05 2010

COGCC/Rifle Office

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number:	10071	4. Contact Name	Matt Barber
2. Name of Operator:	Bill Barrett Corporation	Phone:	(303) 312-8168
3. Address:	1099 18th Street, Suite 2300	Fax:	(303) 291-0420
City:	Denver	State:	CO
Zip:	80202		
5. API Number	05- U45-11616	OGCC Facility ID Number	
6. Well/Facility Name:	Miller	7. Well/Facility Number	44D-36-692
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian):	SENE, Sec. 36, T6S, R92W, 6th PM		
9. County:	Garfield	10. Field Name:	Mamm Creek
11. Federal, Indian or State Lease Number:			

Survey Plat	
Directional Survey	
Surface Eqpmnt Diagram	
Technical Info Page	✓
Other	✓

Complete the Attachment Checklist

OP OGCC

General Notice

<input type="checkbox"/> CHANGE OF LOCATION:	Attach New Survey Plat	(a change of surface qtr/qtr is substantive and requires a new permit)
Change of Surface Footage from Exterior Section Lines:		FNL/FSL
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer		attach directional survey
Latitude		Distance to nearest property line
Longitude		Distance to nearest lease line
Ground Elevation		Distance to nearest well same formation
		Surface owner consultation date:

Distance to nearest bldg, public rd, utility or RR

Is location in a High Density Area (rule 603b)?

Yes/No

GPS DATA:

Date of Measurement	PDOP Reading	Instrument Operator's Name
---------------------	--------------	----------------------------

<input type="checkbox"/> CHANGE SPACING UNIT	<input type="checkbox"/> Remove from surface bond			
Formation	Formation Code	Spacing order number	Unit Acreage	Unit configuration

Signed surface use agreement attached

<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME	NUMBER
Effective Date:	From:	To:
Plugging Bond:	<input type="checkbox"/> Blanket	<input type="checkbox"/> Individual
		Effective Date:

<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS
Was location ever built?	Date well shut in or temporarily abandoned:
Is site ready for inspection?	Has Production Equipment been removed from site?
Date Ready for Inspection:	MIT required if shut in longer than two years. Date of last MIT

Yes No

Yes No

<input type="checkbox"/> SPUD DATE:	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS
	(6 mcs from date casing set)

<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	*submit cbl and cement job summaries				
Method used	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom	Date

<input type="checkbox"/> RECLAMATION:	Attach technical page describing final reclamation procedures per Rule 1004.
Final reclamation will commence on approximately	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date:	Date Work Completed:

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)	
<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Request to Complete
	for Spills and Releases

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

Copyright 1997 by Bill Barrett Corp.
Oil & Gas Conservation Commission
Form 0001 11-01 12-05 0706

Signed:	Matt Barber	Date:	02/01/2010	Email:	mbarber@billbarrettcorp.com
Print Name:	Matt Barber	Title:	Permit Analyst		

COGCC Approved:	<i>Ken J. King</i>	Title:	EIT III	Date:	FEB 08 2010
CONDITIONS OF APPROVAL IF ANY:					

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED
FEB 05 2010
COGCC/Rifle Office

1. OGCC Operator Number: 10071

API Number: 05-045-17616

2. Name of Operator: Bill Barrett Corporation

3. Well Name: Miller

Well Number: 44D-36-692

4. Location: (QtrQtr, Sec, Twp, Rng, Mer): SENE, Sec. 36, T6S, R92W, 6th PM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a “subsequent” report and must accompany Form 4, page 1.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

The referenced well has been successfully cemented according to the approved plan and a summary of the Bradenhead monitoring. Bill Barrett Corporation requests approval to commence completion operations.

Attachments:

CBL

AS-BUILT WELLBORE SCHEMATIC

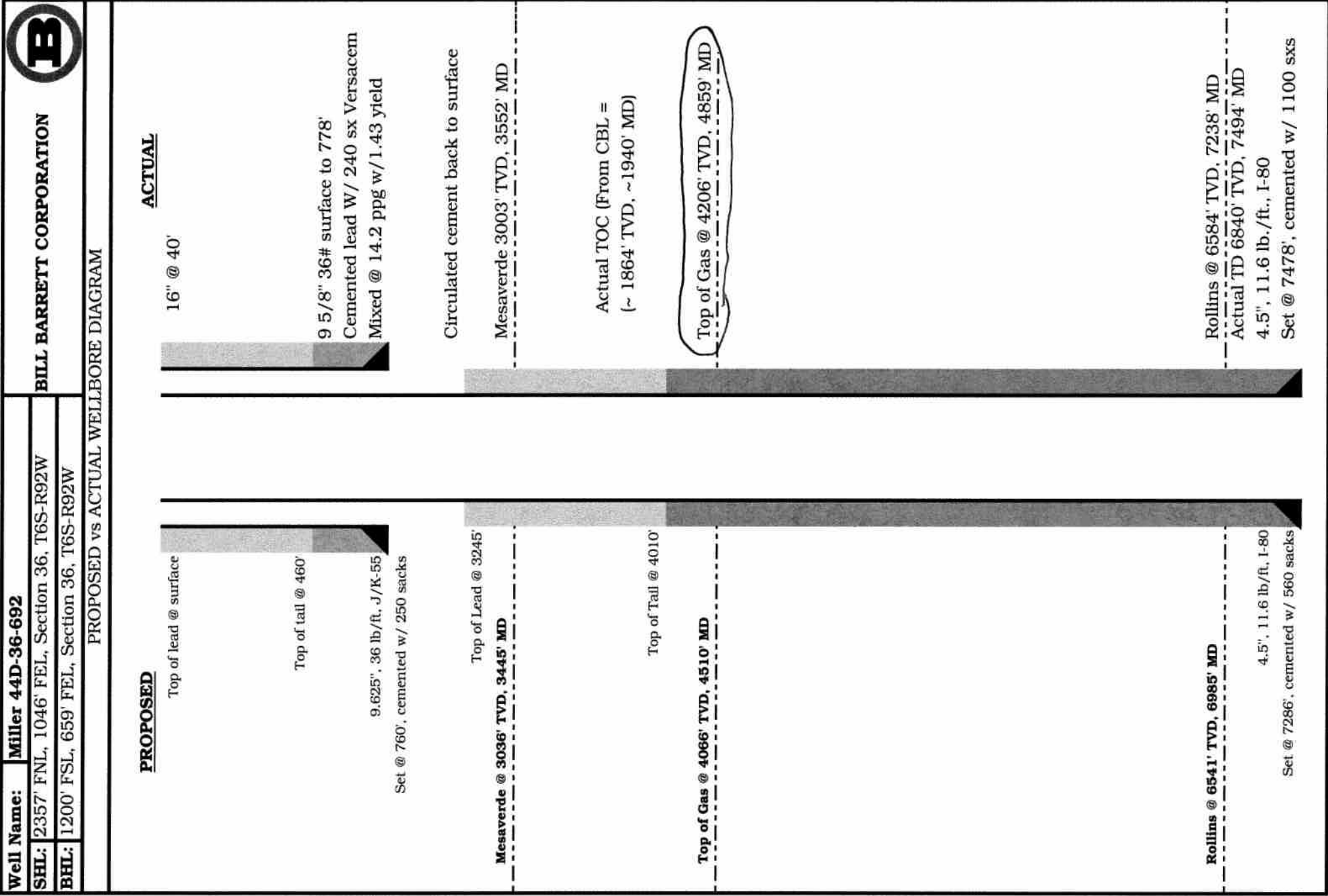
TEMPERATURE SURVEY

BRADENHEAD PRESSURE SUMMARY

RECEIVED

FEB 05 2010

COGCC/Rifle Office



RECEIVED

FEB 05 2010

COGCC/Rifle Office

BILL BARRETT CORPORATION
Bradenhead Pressure Summary



Well: Miller 44D-36-692
Pad: 42A-36-692
API No: 05-045-17616
Permit No: 20085746

Bradenhead Pressure Report Following Primary Cement Job

Date Cemented: 12/21/2009
Plug Bumped: 2100 hrs, 12/21/2009
WOC Time: 3 hrs.
Temp. Log Run: 0300 hrs, 12/22/2009
Casing Slips Set: 0000 hrs, 12/22/2009

Bradenhead Pressures

6 hrs:	0	psig
12 hrs:	0	psig
24 hrs:	0	psig
48 hrs:	0	psig
72 hrs:	0	psig

TOC 2700'
KK

Comments:

Top of cement based on Temperature log: ~ 1,940' MD; Estimated Top of Gas:
~4,859' MD.

RECEIVED
FEB 05 2010
COGCC/Rifle Office



Miller
44D-36-692
T6S R92W S36
05045176160000

