

**FORM**  
**5**Rev  
02/08State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400089348

**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

1. OGCC Operator Number: 10071 4. Contact Name: Elaine Winick  
2. Name of Operator: BARRETT CORPORATION\* BILL Phone: (303) 312-8168  
3. Address: 1099 18TH ST STE 2300 Fax: (303) 291-0420  
City: DENVER State: CO Zip: 80202

5. API Number 05-045-19453-00 6. County: GARFIELD  
7. Well Name: GGU Barge Federal Well Number: 32D-32-691  
8. Location: QtrQtr: SENW Section: 32 Township: 6S Range: 91W Meridian: 6  
Footage at surface: Direction: FNL Distance: 2021 Direction: FWL Distance: 2016  
As Drilled Latitude: \_\_\_\_\_ As Drilled Longitude: \_\_\_\_\_  
GPS Data:  
Data of Measurement: \_\_\_\_\_ PDOP Reading: \_\_\_\_\_ GPS Instrument Operator's Name: \_\_\_\_\_  
\*\* If directional footage  
at Top of Prod. Zone Distance: \_\_\_\_\_ Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ Direction: \_\_\_\_\_  
at Bottom Hole Distance: \_\_\_\_\_ Direction: \_\_\_\_\_ Distance: \_\_\_\_\_ Direction: \_\_\_\_\_  
9. Field Name: MAMM CREEK 10. Field Number: 52500  
11. Federal, Indian or State Lease Number: COC46972

12. Spud Date: (when the 1st bit hit the dirt) 08/19/2010 13. Date TD: \_\_\_\_\_ 14. Date Casing Set or D&A: \_\_\_\_\_

15. Well Classification:

☐ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 830 TVD \_\_\_\_\_ 17 Plug Back Total Depth MD \_\_\_\_\_ TVD \_\_\_\_\_18. Elevations GR 6370 KB 6393

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:  
\_\_\_\_\_

20. Casing, Liner and Cement:

### CASING

| Casing Type | Size of Hole | Size of Casing | Weight Per Foot | Setting Depth | Sacks Cement | Cement Bottom | Cement Top |
|-------------|--------------|----------------|-----------------|---------------|--------------|---------------|------------|
| CONDUCTOR   | 26           | 16             | 42              | 40            | 0            | 40            | 0          |
| SURF        | 12+1/4       | 9+5/8          | 36              | 810           | 240          | 830           | 0          |

### REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Details of work: \_\_\_\_\_

21. Formation log intervals and test zones:

### FORMATION LOG INTERVALS AND TEST ZONES

Comment:

\_\_\_\_\_

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

Signed: \_\_\_\_\_ Print Name: Elaine Winick

Title: \_\_\_\_\_ Date: \_\_\_\_\_ Email: ewinick@billbarrettcorp.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

### **Attachment Check List**

| Att Doc Num | Name | Doc Description                                  |
|-------------|------|--|
| 400089352   |      | BBC GGU BARGE FED 32D-32-691 Surface PJR (2).pdf |

Total Attach: 1 Files