

FORM

4

Rev 12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

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	Brady Riley
2. Name of Operator:	Bill Barrett Corporation	Phone:	(303) 312-8115
3. Address:	1099 18th Street Suite 2300	Fax:	(303) 291-0420
City:	Denver	State:	CO
		Zip:	80202
5. API Number	05- 045-19458	OGCC Facility ID Number	
6. Well/Facility Name:	GGU Barge	7. Well/Facility Number	22C-32-691
8. Location (Qtr/Sec, Twp, Rng, Meridian):	SENW, Sec. 32 T6S, R91W, 6th PM	Directional Survey	
9. County:	Garfield	Surface Eqpm Diagram	
11. Federal, Indian or State Lease Number:		Technical Info Page	X
		Other	X

Complete the Attachment
Checklist

OP OGCC

General Notice

<input type="checkbox"/> CHANGE OF LOCATION:	Attach New Survey Plat	(a change of surface qtr/ir 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/Sec, Twp, Rng, Mer		
Latitude		
Longitude		
Ground Elevation		
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
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):		<input type="checkbox"/> CHANGE WELL NAME
Effective Date:		From:
Plugging Bond:	<input type="checkbox"/> Blanket <input type="checkbox"/> Individual	To:
		Effective Date:
<input type="checkbox"/> ABANDONED LOCATION:		
Was location ever built?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS
Is site ready for inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned:
Date Ready for inspection:		Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No
		MIT required if shut in longer than two years. Date of last MIT
<input type="checkbox"/> SPUD DATE:		<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos 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"/> Request to Vent or Flare
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 602 variance requested
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Request to Complete
	for Spills and Releases
<input type="checkbox"/> E&P Waste Disposal	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Status Update/Change of Remediation Plans	

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

Signed:

Date: 11/1/2010 Email: briley@billbarrettcorp.com

Print Name: Brady Riley

Title: Permit Analyst

OGCC Approved:

Title: EIT 3

Date: 11/4/2010

CONDITIONS OF APPROVAL, IF ANY:



02577411



RECEIVED

NOV 02 2010

COGCC/Rifle-Office

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED
NOV 02 2010
COGCC/Rifle Office

1. OGCC Operator Number: 10071 API Number: 05-045-19458
2. Name of Operator: Bill Barrett Corporation
3. Well Name: 535 Barga Well Number: 22C-32-691
4. Location: (QtrQtr, Sec, Twp, Rng, Mer): S8NW, Sec. 32, T6S, R91W, 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 → 3006 TOC
AS-BUILT WELLBORE SCHEMATIC
TEMPERATURE SURVEY → 2850 TOC
BRADENHEAD PRESSURE SUMMARY → ALL = ∅.

(TOG → 4830)

JSK COGCC 11/4/2010