

FORM
5
Rev
02/08

State 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

DRILLING COMPLETION REPORT

Document Number:

400114534

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: Brady Riley
2. Name of Operator: BARRETT CORPORATION* BILL Phone: (303) 312-8115
3. Address: 1099 18TH ST STE 2300 Fax: (303) 291-0420
City: DENVER State: CO Zip: 80202

5. API Number 05-045-19454-00 6. County: GARFIELD
7. Well Name: GGU Barge Well Number: 22A-32-691
8. Location: QtrQtr: SENW Section: 32 Township: 6S Range: 91W Meridian: 6
Footage at surface: Distance: 2036 feet Direction: FNL Distance: 2026 feet Direction: FWL
As Drilled Latitude: 39.485984 As Drilled Longitude: -107.579858

GPS Data:

Data of Measurement: 08/17/2000 PDOP Reading: 2.4 GPS Instrument Operator's Name: C.D. Slaugh

** If directional footage

at Top of Prod. Zone Distance: 2425 feet Direction: FNL Distance: 1995 feet Direction: FWL
Sec: 32 Twp: 6S Rng: 91W
at Bottom Hole Distance: 2464 feet Direction: FNL Distance: 1996 feet Direction: FWL
Sec: 32 Twp: 6S Rng: 91W

9. Field Name: MAMM CREEK 10. Field Number: 52500

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 08/15/2010 13. Date TD: 09/30/2010 14. Date Casing Set or D&A: 10/01/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 7540 TVD 7519 17 Plug Back Total Depth MD 7492 TVD 7471

18. Elevations GR 6371 KB 6394

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:

Logs Previously Submitted: CBL, Array Induction, Triple Combo, Temp, Caliper, Neutron Density

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Top	Cement Bot	Status
CONDUCTOR	26	16	42	40		0	40	CALC
SURF	12+1/4	9+5/8	36	766	350	0	785	CALC
1ST	7+7/8	4+1/2	11.6	7,538	975	2,360	7,540	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WILLIAMS FORK	3,527		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,223		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

The 72 hour Bradenhead Pressure Test was 0 psig. Conductor was set with grout.

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

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
400114541	DIRECTIONAL SURVEY

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)