

FORM
5Rev
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:

400173349

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: 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 05-045-18658-00 6. County: GARFIELD
7. Well Name: MILLER FEDERAL Well Number: 24B 31-691
8. Location: QtrQtr: NWSE Section: 6 Township: 7S Range: 91W Meridian: 6
Footage at surface: Distance: 8 feet Direction: FNL Distance: 2444 feet Direction: FEL
As Drilled Latitude: 39.476870 As Drilled Longitude: -107.595062

GPS Data:

Data of Measurement: 02/23/2011 PDOP Reading: 6.0 GPS Instrument Operator's Name: T. Barnett

** If directional footage

at Top of Prod. Zone Distance: 488 feet Direction: FSL Distance: 2000 feet Direction: FWL
Sec: 31 Twp: 6S Rng: 91W
at Bottom Hole Distance: 478 feet Direction: FSL Distance: 1993 feet Direction: FWL
Sec: 31 Twp: 6S Rng: 91W

9. Field Name: MAMM CREEK 10. Field Number: 52500
11. Federal, Indian or State Lease Number: COC 066576

12. Spud Date: (when the 1st bit hit the dirt) 07/07/2010 13. Date TD: 12/17/2010 14. Date Casing Set or D&A: 12/18/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 7340 TVD 7114 17 Plug Back Total Depth MD 7292 TVD 706918. Elevations GR 6266 KB 6289

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 Attached: Caliper, Mud, Triple Combo, Temperature

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	42	0	40	0	0	40	CALC
SURF	12+1/4	9+5/8	36	0	771	240	0	790	CALC
1ST	8+3/4	4+1/2	11.6	0	7,334	1,005	2,270	7,340	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	
MESAVERDE	3,330		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,046		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

The 72 hour Bradenhead Pressure Test was 0 psig. Conductor was set with grout. Ground and KB elevations were incorrect on the Preliminary report submitted and corrected on the Final Completion report.

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
400174939	PDF-CALIPER
400174940	PDF-MUD
400174941	PDF-TRIPLE COMBINATION
400174945	PDF-TEMPERATURE
400175029	DIRECTIONAL SURVEY
400175090	FORM 5 SUBMITTED

Total Attach: 6 Files

General Comments

User Group Comment Comment Date

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Total: 0 comment(s)