

**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

Document Number:

400235147

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: Mary Pobuda

2. Name of Operator: BARRETT CORPORATION* BILL

Phone: (303) 312-8511

3. Address: 1099 18TH ST STE 2300

Fax: (303) 291-0420

City: DENVER State: CO Zip: 80202

5. API Number 05-045-20741-00

6. County: GARFIELD

7. Well Name: GGU Kaufman

Well Number: 32D-30-691

8. Location: QtrQtr: LOT 2 Section: 30 Township: 6S Range: 91W Meridian: 6

Footage at surface: Distance: 1654 feet Direction: FNL Distance: 988 feet Direction: FWL

As Drilled Latitude: 39.501087 As Drilled Longitude: -107.602495

GPS Data:

Data of Measurement: 07/25/2011 PDOP Reading: 6.0 GPS Instrument Operator's Name: Jim Kalmon

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: 1467 feet. Direction: FNL Dist.: 1941 feet. Direction: FEL

Sec: 30 Twp: 6S Rng: 91W

9. Field Name: MAMM CREEK

10. Field Number: 52500

11. Federal, Indian or State Lease Number: CO10312

12. Spud Date: (when the 1st bit hit the dirt) 09/14/2011 13. Date TD: 12/19/2011 14. Date Casing Set or D&A: 12/19/2011

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7900 TVD** 7228 17 Plug Back Total Depth MD 7856 TVD** 7178

18. Elevations GR 5835 KB 5858

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:

Caliper, Density, Induction, Quick Look

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	24	16	36	0	40		0	40	CALC
SURF	12+1/4	9+5/8	36	0	826	240	0	842	CALC
1ST	7+7/8	4+1/2	11.6	0	7,900			7,900	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

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

Details of work:

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	3,861		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,585		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

BBC had previously set surface (at about 825') and subsequently reached TD (7900'). We were running the 4.5" production casing which landed at TD but was stuck. We tried to free the casing and it parted at 841'. A subsequent free-point 'test' determined that the casing was stuck at about 5512', and we were able to cut it at that depth.

Bradenhead pressure test was 0 psig; conductor was set with grout. 8 3/4 hole size was used to drill to 5585' then 7 7/8 hole size was drilled to TD.

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

Signed: _____

Print Name: Mary Pobuda

Title: Permit Analyst

Date:

Email: mpobuda@billbarrettcorp.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400235232	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400235159	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400235155	PDF-CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400235156	PDF-DENSITY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400235157	PDF-INDUCTION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400235158	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments**User Group****Comment****Comment Date**

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Total: 0 comment(s)