

FORM  
5Rev  
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:

400257735

Date Received:

03/06/2012

## 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: Megan Finnegan

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 05-045-19909-00

6. County: GARFIELD

7. Well Name: Kaufman

Well Number: 22D-24-692

8. Location: QtrQtr: SWNE Section: 24 Township: 6S Range: 92W Meridian: 6

Footage at surface: Distance: 1430 feet Direction: FNL Distance: 2294 feet Direction: FEL

As Drilled Latitude: 39.516030 As Drilled Longitude: -107.614351

## GPS Data:

Date of Measurement: 12/06/2011 PDOP Reading: 6.0 GPS Instrument Operator's Name: T. Barnett

\*\* If directional footage at Top of Prod. Zone Dist.: 1493 feet. Direction: FNL Dist.: 1969 feet. Direction: FWL

Sec: 24 Twp: 6S Rng: 92W

\*\* If directional footage at Bottom Hole Dist.: 1512 feet. Direction: FNL Dist.: 1969 feet. Direction: FWL

Sec: 24 Twp: 6S Rng: 92W

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) 08/13/2011 13. Date TD: 11/12/2011 14. Date Casing Set or D&amp;A: 11/12/2011

## 15. Well Classification:

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

16. Total Depth MD 7624 TVD\*\* 7465 17 Plug Back Total Depth MD 7571 TVD\*\* 7412

18. Elevations GR 5772 KB 5794

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:

CBL, Triple Combo, Temperature, Mud

## 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             | 822           | 240       | 0       | 822     | CALC   |
| 1ST         | 7+7/8        | 4+1/2          | 11.6  | 0             | 7,619         | 972       | 3,020   | 7,624   | CBL    |

**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  | 3,696          |        | <input type="checkbox"/> | <input type="checkbox"/> |   |
| ROLLINS        | 7,306          |        | <input type="checkbox"/> | <input type="checkbox"/> |   |

Comment:

The 72 hour Bradenhead Pressure Test was 0 psig. Conductor was cemented with grout. 8 3/4 hole size was used to drill from the bottom of surface casing to 5881' then 7 7/8 hole 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: Megan Finnegan

Title: Permit Analyst Date: 3/6/2012 Email: mfinnegan@billbarrettcorp.com

**Attachment Check List**

| Att Doc Num                 | Document Name          | attached ? |                                     |    |                                     |
|-----------------------------|------------------------|------------|-------------------------------------|----|-------------------------------------|
| <u>Attachment Checklist</u> |                        |            |                                     |    |                                     |
|                             | CMT Summary *          | Yes        | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
|                             | Core Analysis          | Yes        | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
| 400258140                   | 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>    |                        |            |                                     |    |                                     |
| 400257735                   | FORM 5 SUBMITTED       | Yes        | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| 400258136                   | LAS-TEMPERATURE        | Yes        | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| 400258137                   | LAS-TRIPLE COMBINATION | Yes        | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| 400258138                   | LAS-MUD                | Yes        | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| 400258139                   | LAS-CEMENT BOND        | Yes        | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| 400258141                   | DIRECTIONAL DATA       | Yes        | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |

**General Comments**

| User Group | Comment | Comment Date |
|------------|---------|--------------|
|------------|---------|--------------|

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Total: 0 comment(s)