



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)

RECEIVED
APR 05 2012
OGCC/Rifle Office

1. OGCC Operator Number: 10071	4. Contact Name: Mary Pobuda	Complete for Attachment Checklist
2. Name of Operator: Bill Barrett Corporation	Phone: 303-312-8531	
3. Address: 1099 18th Street, Suite 2300 City: Denver State: CO Zip: 80202	Fax: 303-291-0420	OP OGCC
5. API Number 05-045-19235	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: Werner	7. Well/Facility Number: 31A-26-692	Directional Survey
8. Location (Qtr/Sec, Twp, Rng, Meridian): SWSE, Sec. 23, T6S, R92W 6th PM		Surface Eqgmt Diagram
9. County: Garfield	10. Field Name: Mamm Creek	Technical Info Page
11. Federal, Indian or State Lease Number:		Other BHP, Temp, WBD

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Surface Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage from Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bottomhole location Qtr/Sec, Twp, Rng, Mer: _____

Latitude: _____ Distance to nearest property line: _____ Distance to nearest bldg, public rd, utility or RR: _____

Longitude: _____ Distance to nearest lease line: _____ Is location in a High Density Area (rule 603b)? Yes/No:

Ground Elevation: _____ Distance to nearest well same formation: _____ Surface owner consultation date: _____

GPS DATA:
Date of Measurement: _____ PDOP Reading: _____ Instrument Operator's Name: _____

CHANGE SPACING UNIT
Formation: _____ Formation Code: _____ Spacing order number: _____ Unit Acreage: _____ Unit configuration: _____

Remove from surface bond
Signed surface use agreement attached:

CHANGE OF OPERATOR (prior to drilling):
Effective Date: _____
Plugging Bond: Blanket Individual

CHANGE WELL NAME NUMBER
From: _____
To: _____
Effective Date: _____

ABANDONED LOCATION:
Was location ever built? Yes No
Is site ready for inspection? Yes No
Date Ready for Inspection: _____

NOTICE OF CONTINUED SHUT IN STATUS
Date well shut in or temporarily abandoned: _____
Has Production Equipment been removed from site? Yes No
MIT required if shut in longer than two years. Date of last MIT: _____

SPUD DATE: _____

REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

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: _____

RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.
Final reclamation will commence on approximately: _____ Final reclamation is completed and site is ready for inspection:

Technical Engineering/Environmental Notice

Notice of Intent
Approximate Start Date: 4/9/12

Report of Work Done
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"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Request to Complete	for Spills and Releases

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

Signed: Mary Pobuda Date: 4/5/12 Email: mpobuda@billbarrettcorp.com
Print Name: Mary Pobuda Title: Permit Analyst

OGCC Approved: [Signature] Title: NOVAE Date: 4/5/12

CONDITIONS OF APPROVAL, IF ANY:

FORM
4
Rev 12/05

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY
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- 1. OGCC Operator Number: 10071 API Number: 05-045-19235
- 2. Name of Operator: Bill Barrett Corporation OGCC Facility ID # _____
- 3. Well/Facility Name: Werner Well/Facility Number: 31A-26-692
- 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWSE, Sec. 23, T6S, R92W 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.

5. 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
- AS-BUILT WELLBORE SCHEMATIC
- TEMPERATURE SURVEY
- BRADENHEAD PRESSURE SUMMARY

TOC 5380' JEK

Well Name:	Werner 31A-26-692	BILL BARRETT CORPORATION	
SHL:	SWSE Sec. 23 T6S R92W 6th PM	date updated	3/28/2012
		updated by	Mary Pobuda

05-045-19235

AS DRILLED

Top of lead @ surface

9.625", 36 lbs/ft, J-55

12-1/4" Hole

SPUD 11/25/2011
TD 11/28/2011

set @ 804

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 APR 11 2012
 COGCC/Rift Office

Drilled 8 3/4" hole from base surface casing
to 5680 MD
then drilled 7 7/8" hole to TD

Top of tail cement @ 5350 MD 4843 TVD

Mesaverde 4021 MD 3610 TVD

Top of Gas 5921 MD 5412 TVD

Cementing Program:

Surface:

Lead: 120 sks
Tail: 120 sks

Production:

Tail: 565 sks

Rollins 7728 MD 7219 TVD

4 5/8", 11.6 lbs/ft, E-80

TD 8061 MD 7552 TVD

set @ 8060 MD

NOT TO SCALE

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BILL BARRETT CORPORATION
Bradenhead Pressure Summary



Well: Werner 31A-26-692
Pad: CB-Werner SWSE 23-692
API No: 05-045-19235
Document No: _____

Bradenhead Pressure Report Following Primary Cement Job

Date Cemented: 11/29/2011
Plug Bumped: 11/29/2011 @ 19:30
Casing Slips Set: 11/29/2011 @ 22:00
WOC Time: 5+hrs
Temp. Log Run: 11/30/2011 @ 03:30

Bradenhead Pressures

6 hrs:	0	psig
12 hrs:	0	psig
24 hrs:	0	psig
48 hrs:	0	psig
72 hrs:	0	psig

Comments:

Top of cement based on Temperature log: ~5350' MD; Estimated Top of Gas: 5921' MD.

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APR 05 2012
COGCC/Rifle Office

Western
214.224-5472
7803 BIRNEY SQ.
DALLAS, TX 75205

