FORM 5 Rev 02/08	**State of Colorado** **Oil and Gas Conservation Commission** 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109 **DRILLING COMPLETION REPORT**		DE	ET	OE	ES

Document Number: 400314522

Date Received:

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   05-123-35263-00
6. County: WELD
7. Well Name: Siebring   Well Number: 5-63-32-48H
8. Location: QtrQtr: SENE   Section: 32   Township: 5N   Range: 63W   Meridian: 6
   Footage at surface: Distance: 2028 feet   Direction: FNL   Distance: 232 feet   Direction: FEL
   As Drilled Latitude: 40.357700   As Drilled Longitude: -104.451260

GPS Data:
   Data of Measurement: 08/08/2012   PDOP Reading: 1.3   GPS Instrument Operator's Name: Wyatt Hall

   ** If directional footage at Top of Prod. Zone   Dist.: ____ feet. Direction: ____   Dist.: ____ feet. Direction: ____
      Sec: ____   Twp: ____   Rng: ____
   ** If directional footage at Bottom Hole   Dist.: 1912 feet. Direction: FNL   Dist.: 720 feet. Direction: FEL
      Sec: 32   Twp: 5N   Rng: 63W

9. Field Name: WATTENBERG   10. Field Number: 90750
11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 05/29/2012 13. Date TD: 06/10/2012 14. Date Casing Set or D&A: _____

15. Well Classification:
   ☐ Dry   ☒ Oil   ☐ Gas/Coalbed   ☐ Disposal   ☐ Stratigraphic   ☐ Enhanced Recovery   ☐ Storage   ☐ Observation

16. Total Depth   MD 6418   TVD** 6343   17 Plug Back Total Depth   MD 5570   TVD** _____

18. Elevations   GR 4570   KB 4594 | 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:

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	14	65	0	80		0	80	CALC
SURF	13+1/2	9+5/8	36	0	1,520	665	0	1,520	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf 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	
			☐	☐	

Comment:

Please note that this well was sidetracked due to douwnhole issues incountered when drilling intermediate. Approval was recieved to sidetrack the well on 6/11/12.

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 ?			

Attachment Checklist

Att Doc Num	Document Name		Yes		No	
400314786	CMT Summary *		Yes	☒	No	☐
	Core Analysis		Yes	☐	No	☒
	Directional Survey **		Yes	☐	No	☒
	DST Analysis		Yes	☐	No	☒
	Logs		Yes	☐	No	☒
	Other		Yes	☐	No	☒

Other Attachments

400314783	DIRECTIONAL DATA		Yes	☒	No	☐

General Comments

User Group	**Comment**	**Comment Date**

Total: 0 comment(s)