

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400335047

Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 10071
2. Name of Operator: BARRETT CORPORATION* BILL
3. Address: 1099 18TH ST STE 2300 City: DENVER State: CO Zip: 80202
4. Contact Name: Mary Pobuda Phone: (303) 312-8511 Fax: (303) 291-0420

5. API Number 05-001-09602-00
6. County: ADAMS
7. Well Name: CO State A Well Number: 44-36
8. Location: QtrQtr: SESE Section: 36 Township: 1S Range: 66W Meridian: 6
9. Field Name: THIRD CREEK Field Code: 81800

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/25/2012 End Date: 07/25/2012 Date of First Production this formation:
Perforations Top: 7540 Bottom: 7626 No. Holes: 54 Hole size: 0.42

Provide a brief summary of the formation treatment: Open Hole: []

271,894 KCL Water, 198,000 Crosslinked, 69,894 Linear Gel, 2000 15% HCL

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 541788 Max pressure during treatment (psi): 5948
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment: Min frac gradient (psi/ft): 0.84
Total acid used in treatment (bbl): 48 Number of staged intervals: 2
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 177
Fresh water used in treatment (bbl): 539788 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 316880 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 08/10/2012 Hours: 24 Bbl oil: 3 Mcf Gas: 49 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 3 Mcf Gas: 49 Bbl H2O: 0 GOR: 16897
Test Method: flowing Casing PSI: 850 Tubing PSI: 100 Choke Size:
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1419 API Gravity Oil: 52
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7899 Tbg setting date: 08/04/2012 Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze: [] Yes [] No If yes, number of sacks cmt

** Bridge Plug Depth: ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

Comment:

This well was originally drilled and completed in 2009 by Texas American Resources. BBC Acquired the well in 2011 and filed a form 2 (approved 4/27/12) to complete a new formation.

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	Name
400337556	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)