

FORM  
5Rev  
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



DE ET OE ES

Document Number:

400344268

Date Received:

11/29/2012

## 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: Erin Joseph

2. Name of Operator: BARRETT CORPORATION\* BILL

Phone: (303) 312-8738

3. Address: 1099 18TH ST STE 2300

Fax: (303) 2910420

City: DENVER State: CO Zip: 80202

5. API Number 05-045-21104-00

6. County: GARFIELD

7. Well Name: Dixon Federal

Well Number: 11B-23-692

8. Location: QtrQtr: SWNW Section: 23 Township: 6S Range: 92W Meridian: 6

Footage at surface: Distance: 1494 feet Direction: FNL Distance: 358 feet Direction: FWL

As Drilled Latitude: 39.515757 As Drilled Longitude: -107.642448

## GPS Data:

Data of Measurement: 08/13/2010 PDOP Reading: 6.0 GPS Instrument Operator's Name: James Kalmon

\*\* If directional footage at Top of Prod. Zone Dist.: 855 feet. Direction: FNL Dist.: 662 feet. Direction: FWL  
Sec: 23 Twp: 6S Rng: 92W

\*\* If directional footage at Bottom Hole Dist.: 871 feet. Direction: FNL Dist.: 654 feet. Direction: FWL  
Sec: 23 Twp: 6S Rng: 92W

9. Field Name: MAMM CREEK

10. Field Number: 52500

11. Federal, Indian or State Lease Number: COC15976

12. Spud Date: (when the 1st bit hit the dirt) 03/23/2012 13. Date TD: 06/24/2012 14. Date Casing Set or D&amp;A: 06/26/2012

## 15. Well Classification:

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

16. Total Depth MD 7746 TVD\*\* 7686 17 Plug Back Total Depth MD 7697 TVD\*\* 7657

18. Elevations GR 5878 KB 5901

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, Mud, Temp

## 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	36	0	40		0	40	CALC
SURF	12+1/4	9+5/8	36	0	801	240	0	822	CALC
1ST	7+7/8	4+1/2	11.6	0	7,744	1,063	2,940	7,746	CBL

**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	
WILLIAMS FORK	3,880		<input type="checkbox"/>	<input type="checkbox"/>	
ILES	7,508		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

the 72 hour bradenhead pressure is 0 psig. Conductor was set with grout. 8 1/2" hole size was drilled from bottom of surface casing to 5094' and then 7 7/8" was used to TD. As drilled GPS was taken from the conductor. Surface casing was set with an air rig.

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

Signed: \_\_\_\_\_ Print Name: Erin Joseph

Title: Regulatory Analyst II

Date: 11/29/2012

Email: ejoseph@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"/>
400348060	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>					
400344268	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400344284	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400348055	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400350138	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400350143	LAS-TEMPERATURE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400350150	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	Conductor casing data sent. Logs received 12/19/12	12/21/2012 8:13:32 AM
Permit	On hold. Conductor casing data are missing. Paper mud log missing.	12/11/2012 9:31:54 AM

Total: 2 comment(s)