

FORMATION: LYONS Status: TEMPORARILY ABANDONED Treatment Type: _____

Treatment Date: 09/19/2014 End Date: 09/19/2014 Date of First Production this formation: _____

Perforations Top: 7942 Bottom: 8037 No. Holes: 366 Hole size: 39/100

Provide a brief summary of the formation treatment: _____ Open Hole:

n/a

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____ Number of staged intervals: _____

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____

Total proppant used (lbs): _____ Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: WELL WAS DRILLED AS POSSIBLE SWD WELL AND THIS FORMATION WAS NEVER COMPLETED. PERFORATIONS WERE DONE AS PART OF SWD CONVERSION THAT HAS NOT BEEN COMPLETED. PLUGGED BACK WITH CIBP 9/23/14.

Date formation Abandoned: 09/23/2014 Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: 7270 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

Comment: _____

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: _____ Print Name: Brady Riley
Title: Permit Analyst Date: _____ Email: briley@billbarrettcorp.com

Attachment Check List

Att Doc Num	Name
400890138	WELLBORE DIAGRAM
400890141	WIRELINE JOB SUMMARY
400890143	CEMENT JOB SUMMARY

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)