

FORM
5Rev
09/14

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:

401148982

Date Received:

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

OGCC Operator Number: 10071

Contact Name: BRADY RILEY

Name of Operator: BARRETT CORPORATION* BILL

Phone: (303) 312-8115

Address: 1099 18TH ST STE 2300

Fax:

City: DENVER

State: CO

Zip: 80202

API Number 05-123-42709-00

County: WELD

Well Name: ANSCHUTZ EQUUS FARMS

Well Number: 4-62-20-0108C2B

Location: QtrQtr: NWNW Section: 20 Township: 4N Range: 62W Meridian: 6

Footage at surface: Distance: 936 feet Direction: FNL Distance: 275 feet Direction: FWL

As Drilled Latitude: 40.302500 As Drilled Longitude: -104.356333

GPS Data:

Date of Measurement: 10/27/2016 PDOP Reading: 1.4 GPS Instrument Operator's Name: DALLAS NIELSEN

** If directional footage at Top of Prod. Zone Dist.: 26 feet. Direction: FSL Dist.: 675 feet. Direction: FEL

Sec: 16 Twp: 4N Rng: 62W

** If directional footage at Bottom Hole Dist.: 11 feet. Direction: FSL Dist.: 505 feet. Direction: FEL

Sec: 16 Twp: 4N Rng: 62W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 09/10/2016 Date TD: 09/18/2016 Date Casing Set or D&A: 09/20/2016

Rig Release Date: 10/24/2016 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 15947 TVD** 6302 Plug Back Total Depth MD 15868 TVD** 6303

Elevations GR 4604 KB 4624

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

MUD, CBL, MWD/LWD. Open Hole Log/IND was ran on the Anschutz Equus Farms 4-62-20-3225D2 WELL (API 05-123-42711)

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	20	16	75	0	100		0	100	VISU
SURF	13+1/2	9+5/8	36	0	858	290	0	858	VISU
1ST	8+3/4	7	26	0	6,788	605	1,596	6,788	CBL
1ST LINER	6+1/8	4+1/2	11.6	5912	15,915	640	5,912	15,915	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:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
SHANNON	4,974		NO	NO	
SHARON SPRINGS	6,181		NO	NO	
NIOBRARA	6,312		NO	NO	

Comment:

CONDUCTOR WAS SET AS REPORTED ON THIS FORM 5 ON 9/4/2016. OPEN HOLE LOGS (IND) FOR THIS PAD ARE SUBMITTED UNDER THE ANSCHUTZ EQUUS FARMS 4-62-20-3225D2 WELL (API 05-123-42711). PBTD IS TAKEN FROM THE LANDING COLLAR SET DEPTH.

BBC detected a casing leak in 4 1/2" liner at approximately 6,800' MD. Planned P&A procedures were submitted on Form 6 (doc #401156168).

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	Document Name	attached ?
<u>Attachment Checklist</u>		
401149976	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
401156462	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>		
401149148	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401149167	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401149177	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401149178	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401149180	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401149186	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401149189	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401156463	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)