



IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

CASING									
Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8		0	478	300	0	478	CALC
ADDITIONAL CEMENT									
Cement work date: _____									
Details of work: _____									
_____									
Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom				

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	
HEEBNER	3,784	3,819	<input type="checkbox"/>	<input type="checkbox"/>	
SHAWNEE	3,810	3,783	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TORONTO	3,820	3,839	<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	3,840	4,364	<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	4,365	4,571	<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	4,572	4,784	<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	4,785	4,929	<input type="checkbox"/>	<input type="checkbox"/>	
SPERGEN	5,120	5,212	<input type="checkbox"/>	<input type="checkbox"/>	
WARSAW	5,213		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

MORROW SHALE 4785 4929  
MORROW SANDSTONE 4930 5002

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

Signed: \_\_\_\_\_ Print Name: DUSTIN WYER

Title: OPERATIONS Date: 12/14/2010 Email: CUSTIN@VALENERGY.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"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
2112537	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	REQ AS DRILLED TAKEN AFTER THE SPUD DATE, CMT TKTS FOR SUF CSG WITH FORM 6 DOC# 25912147	7/15/2011 9:59:15 AM

Total: 1 comment(s)