

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/pref 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	
MESAVERDE	8,008		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	11,338		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	11,718		<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	11,853		<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	12,068		<input type="checkbox"/>	<input type="checkbox"/>	
SEGO	12,698		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____ Print Name: JENN MENDOZA

Title: PERMIT TECH II Date: 6/6/2011 Email: JENN.MENDOZA@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2586687	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2586686	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
2586685	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	off hold-rec'd email of surf. cmt. summary--attached to well file by API #.	11/18/2011 7:20:48 AM
Permit	re-req'd surf. cmt. tkt.	11/14/2011 8:00:43 AM
Permit	REQ'D SURF. CMT. TKT.	8/11/2011 3:02:44 PM

Total: 3 comment(s)