

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	
PARKMAN	4,075	4,300	<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,522	4,716	<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,057	5,084	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,358		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,593		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,615		<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: Emily Carrender

Title: Operation Specialist I Date: _____ Email: emily.carrender@anadarko.com

The subreport 'subreport3' could not be found at the specified location W:\inetpub\Net\Reports\AttachListNew.rdlc. Please

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)