

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	18	48	0	63	24	0	63	VISU
SURF	13+1/2	9+5/8	32.3	0	1,154	320	0	1,154	VISU
1ST	8+3/4	4+1/2	11.6	0	8,886	1,250	3,613	8,886	CBL

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:

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	
WASATCH G	2,371		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	4,994		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7,881		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,755		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Please note: The "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

Surface Pressure = 0

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

Signed: _____

Print Name: GINA RANDOLPH

Title: PERMIT TECH II

Date:

Email: GINA.RANDOLPH@WPXENERGY.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400591179	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400591170	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"/>
Other Attachments			
400591129	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400591151	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400591154	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400591162	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400591164	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400591168	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400591177	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)