

CEMENT JOB REPORT



CUSTOMER BAYSWATER EXPLORATION ;			DATE 13-JUL-15		F.R. # 10011164954		SERV. SUPV. FELIPE LANDA							
LEASE & WELL NAME CARLSON #A-15-16HN - API 05123417200000			LOCATION 15-5N-65W			COUNTY-PARISH-BLOCK Weld Colorado								
DISTRICT Brighton			DRILLING CONTRACTOR RIG # FRONTIER 8			TYPE OF JOB Surface								
SIZE & TYPE OF PLUGS		LIST-CSG-HARDWARE			MECHANICAL BARRIERS		MD	TVD	HANGER TYPES		MD	TVD		
9-5/8" Top Cem Plug, Nitrile cvr, Phc		Centralizer, with Pins, 9-5/8 in												
		Float Collar, Auto Fill, 9-5/8 - 8rd												
		Float Shoe 9-5/8 - 8rd												
		Cement Basket, Slip On, 9-5/8 in												
MATERIALS FURNISHED BY BJ				LAB REPORT NO.		PHYSICAL SLURRY PROPERTIES								
						SACKS OF CEMENT	SLURRY WGT PPG	SLURRY YLD FT³	WATER GPS	PUMP TIME HR:MIN	Bbl SLURRY	Bbl MIX WATER		
Fresh Water							8.34				20			
Type III Cement + Adds						275	14.5	1.40	6.80		68.5	44.41		
Fresh Water							8.34				61.7			
Available Mix Water		200 Bbl.		Available Displ. Fluid		200 Bbl.		TOTAL		150.2		44.41		
HOLE			TBG-CSG-D.P.						COLLAR DEPTHS					
SIZE	% EXCESS	DEPTH	ID	OD	WGT.	TYPE	MD	TVD	GRADE	SHOE	FLOAT	STAGE		
12.25	30	850	8.921	9.625	36	CSG	842		J-55	842	799	0		
LAST CASING			PKR-CMT RET-BR PL-LINER			PERF. DEPTH		TOP CONN		WELL FLUID				
ID	OD	WGT	TYPE	MD	TVD	BRAND & TYPE		DEPTH	TOP	BTM	SIZE	THREAD	TYPE	WGT.
						NO PACKER		0			9.625	8RD	WATER BASED	8.34
DISPL. VOLUME		DISPL. FLUID		CAL. PSI	CAL. MAX PSI	OP. MAX	MAX TBG PSI		MAX CSG PSI		MIX WATER			
VOLUME	UOM	TYPE		WGT.	BUMP PLUG	TO REV.	SQ. PSI	RATED	Operator	RATED	Operator			
61.7	BBLS	Fresh Water		8.34	256	0	0	0	0	3520	2816	TANK		
Circulation Prior to Job														
Circulated Well: Rig <input checked="" type="checkbox"/> BJ <input type="checkbox"/>			Circulation Time: 1			Circulation Rate: 4 BPM								
Mud Density In: 8.34 LBS/G			Mud Density Out: 8.34 LBS/GAL			PV & YP Mud In:			PV & YP Mud Out:					
Gas Present: NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>			Units:			Solids Present at End of Circulation: NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>								
Displacement And Mud Removal														
Displaced By: Rig <input type="checkbox"/> BJ <input checked="" type="checkbox"/>			Amount Bled Back After Job: 1 BBLS											
Returns During Job: <input type="checkbox"/> NONE <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> FULL			Method Used to Verify Returns: VISUAL											
Cement Returns at Surface: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			Were Returns Planned at Surface: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES											
Pipe Movement: <input type="checkbox"/> ROTATION <input type="checkbox"/> RECIPROCATION <input type="checkbox"/> NONE <input type="checkbox"/> UNABLE DUE TO STUCK PIPE														
Centralizers: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES			Quantity: 8			Type: <input type="checkbox"/> BOW <input type="checkbox"/> RIGID								
Job Pumped Through: <input type="checkbox"/> CHOKE MANIFOLD <input type="checkbox"/> SQUEEZE MANIFOLD <input checked="" type="checkbox"/> MANIFOLD <input type="checkbox"/> NO MANIFOLD														
Plugs														
Number of Attempts by BJ: 0			Competition:			Wiper Balls Used: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			Quantity:					
Plug Catcher Used: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			Parabow Used: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES											
Was There a Bottom: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			Top of Plug: 0 FT			Bottom of Plug: 0 FT								
Squeezes (Update Original Treatment Report for Primary Job)														
BLOCK SQUEEZE <input type="checkbox"/>			SHOE SQUEEZE <input type="checkbox"/>			TOP OF LINER SQUEEZE <input type="checkbox"/>			PLANNED <input type="checkbox"/> UNPLANNED <input type="checkbox"/>					
Liner Packer: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			Bond Log: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			PSI Applied: 0			Fluid Weight: 0 LBS/GAL					
Casing Test (Update Original Treatment Report for Primary Job)														
Casing Test Pressure: 0 PSI			With 0 LBS/GAL Mud			Time Held: 00 Hours 00 Minutes								
EXPLANATION: TROUBLE SETTING TOOL, RUNNING CSG, ETC. PRIOR TO CEMENTING: NONE														

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Shoe Test (Update Original Treatment Report for Primary Job)

Depth Drilled out of Shoe: 0 FT	Target EMW: 0 LBS/GAL	Actual EMW: 0 LBS/GAL
Number of Times Tests Conducted: 0	Mud Weight When Test was Conducted: 0 LBS/GAL	

Problems Before Job (I.E. Running Casing, Circulating Well, ETC)
NONE

Problems During Job (I.E. Lost Returns, Equipment Failure, Bulk Delivery, Foaming, ETC)
NONE

Problems After Job (I.E. Gas at Surface, Float Equipment Failed, ETC)
NONE

PRESSURE/RATE DETAIL						EXPLANATION	
TIME HR.:MIN.	PRESSURE - PSI		RATE BPM	Bbl. FLUID PUMPED	FLUID TYPE	SAFETY MEETING: BJ CREW <input checked="" type="checkbox"/> CO. REP. <input checked="" type="checkbox"/>	
	PIPE	ANNULUS				TEST LINES	3037 PSI
						CIRCULATING WELL - RIG <input checked="" type="checkbox"/> BJ <input type="checkbox"/>	
03:00	0	0	0	0	NA	ARRIVE ON LOCATION (rig running casing)	
03:15	0	0	0	0	NA	SPOT TRUCKS/PRE RIG UP SAFETY MEETING	
04:20	0	0	0	0	NA	PRE JOB SAFETY MEETING	
04:40	45	0	.8	1	H2O	LOAD LINES	
04:42	3037	0	0	0	H2O	PRESSURE TEST	
04:48	275	0	5	10	H2O	FRESH WATER	
04:52	262	0	5	10	H2O	FRESH WATER + DYE	
05:00	469	0	4	68	CEMENT	275 SACKS OF TYPE III CEMENT + 0.08 lbs/sack STATIC FREE + 1% CALCIUM CHLORIDE + 0.25 lbs/sack CELLO FLAKE + 0.01 gps FP-6L @ 14.5 PPG	
05:32	0	0	0	0	NA	DROP PLUG	
05:33	380	0	5.2	40	H2O	DISPLACE	
05:42	383	0	3.5	10	H2O	RATE CHANGE	
05:46	363	0	2.5	11	H2O	RATE CHANGE	
05:50	805	0	2.5	0	H2O	BUMP PLUG @ 61 BBLs (11 bbls cement to surface)	
05:53	0	0	0	0	H2O	CHECK FLOATS	
06:00	0	0	0	0	NA	POST JOB RIG DOWN SAFETY MEETING	

BUMPED PLUG	PSI TO BUMP PLUG	TEST FLOAT EQUIP.	BBL.CMT RETURNS/ REVERSED	TOTAL BBL. PUMPED	PSI LEFT ON CSG	SPOT TOP OUT CEMENT	Service Supervisor Signature: _____
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	805	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	11	143	0	Y <input checked="" type="checkbox"/> N	

CARLSON A-15-16HN (C156)

