

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:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WASATCH G	3,696				
MESAVERDE	6,361				Mesaverde top is the OH Creek top.
OHIO CREEK	6,361				OH Creek top is the Mesaverde top.
WILLIAMS FORK	6,509				
CAMEO	9,219				
ROLLINS	9,973				

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.

*No Open Hole logs were run on this well. Triple combination logs were run on the RU 514-7 (045-23260).

**The CBL PBSD (depth logger) is set above the float collar, the float collar is set at 10066'.

***The WSTCG formation top is an estimate, data was not being recorded when the logs were at this depth.

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

Signed: _____

Print Name: Whitney Szabo

Title: Regulatory Tech

Date: _____

Email: wszabo@terraep.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401240156	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401240155	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			
401240163	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401240175	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401240177	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401240180	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401240187	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401240190	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401240191	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)