

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	
PARKMAN	3,320		NO	NO	
SUSSEX	4,222		NO	NO	
SHARON SPRINGS	6,812		NO	NO	
NIOBRARA	6,852		NO	NO	
FORT HAYS	7,417		NO	NO	
CODELL	7,525		NO	NO	
CARLILE	7,658		NO	NO	

Comment:

There was no OPEN HOLE Log run on this pad and none exist from a nearby well. Synergy notified COGCC Jane Stanczyk.

The Shannon formation faulted out and there are no tops for this formation for this well.

A formal as-drilled was performed and is attached with this submittal as verification of the surface location and ground elevation. Any other attachment that shows a different surface location or ground elevation is not accurate.

BHL footages taken off of the first page of the directional survey.

Sliding sleeve liner.

Bottom perf = TDMD due to last sleeve being below bottom packer in sliding sleeve liner.

Surface cement report has incorrect well name (missing the #5 in A-5NHZ). Verified that it is the correct cement report.

Each attachment and log run during the drilling and completion of a well is intended to fulfill a specific purpose. At times, vendors that run these logs or jobs put additional data in their report that is not critical or relevant to the technical purpose of their job. This data is not verified with Synergy and at times is not 100% accurate. For example, setting depths for a liner, date casing was set, or TD dates on a mud log may not be accurate. Synergy confirms setting depths through either daily drilling reports or liner reports, confirms date casing was set through daily drilling reports, and confirms TD through either our Pason system or daily drilling reports. Additionally, Synergy confirms liner tops through liner reports and not the CBL. Synergy is not able to request that these vendors not include this information in their report.

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

Signed: _____

Print Name: Erin Ekblad

Title: Regulatory Manager

Date: _____

Email: eekblad@srcenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401302658	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401302655	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			
401302654	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401302666	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401302676	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401302678	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401302680	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401302682	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401302683	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401302685	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401303069	WELL LOCATION PLAT	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)