

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203



109

FOR OGCC USE ONLY

RECEIVED

DEC 28 01

COGCC



DRILLING COMPLETION

This form is to be submitted within 30 days of a well's completion. If the well is deepened or sidetracked, a new Form 5 will be required. If an attempt has been made to complete/produce a well, then the operator shall submit a Form 5A (Completed Interval Report). If the well has been plugged, submit Form 6 (Well Abandonment Report).

1. OGCC Operator Number: <u>76100</u>	4. Contact Name & Phone <u>JUDY THRONEBERRY</u>
2. Name of Operator: <u>SAMEDAN OIL CORPORATION</u>	No: <u>(281) 876-6150</u>
3. Address: <u>12600 NORTHBOROUGH, SUITE 250</u>	Fax: <u>(281) 872-2503</u>
City: <u>HOUSTON</u> State: <u>TEXAS</u> Zip: <u>70067</u>	

Complete the
Attachment Checklist

5. API Number: <u>05-125-08393</u>	6. County: <u>YUMA</u>
7. Well Name: <u>STALLINGS</u>	Well Number: <u>12-7</u>
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>S1/4, SEC. 7, T1N, R46W, 6TH MERIDIAN</u>	9. Was directional survey run? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Footage at Surface: <u>560 FWL & 1700 FNL</u>	
If directional, footage at Top of Prod. Zone: _____	
If directional, footage at Bottom Hole: _____	
10. Field Name: <u>SCHRAMM</u>	Field Number: <u>76825</u>
11. Federal, Indian or State Lease Number: _____	
12. Spud Date: <u>10/15/2001</u>	13. Date TD Reached: <u>10/17/2001</u>
14. Date Completed or D&A: <u>11/10/2001</u>	
16. Total Depth MD <u>2876</u> TVD _____	17. Plug Back Total Depth MD <u>2735</u> TVD _____
18. Was a Mud Log Run?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No **A copy of all electric and mud logs must be submitted.**	19. Elevations GR <u>4026</u> KB <u>4032</u>
20. List Electric Logs Run: <u>Dual Induction SFL/GR Compensated Neutron Litho Density & AIT/Neutron/Density</u>	

Survey Plat	Oper	OGCC
Directional Survey		
Surface Equipment Diagram		
Technical Information Page		
Other		
15. Well Classification		
<input type="checkbox"/> Dry	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
<input type="checkbox"/> Coalbed		
<input type="checkbox"/> Stratigraphic	<input type="checkbox"/> Disposal	
<input type="checkbox"/> Enhanced Recovery		
<input type="checkbox"/> Gas Storage	<input type="checkbox"/> Observation	
<input type="checkbox"/> Other: _____		

CASING, LINER and CEMENT

							Submit contractor's cement job summary for each string cemented.			
String	Hole Size	Csg/Liner Size	Csg/Liner Wt. (Lbs.)	Csg/Liner Top	Csg/Tool Setting Depth	No. of Sacks	Cement Interval		Identify Method	
							Top	Bottom	CBL	Calc
Surface	9 7/8	7	20	Surface	467	200	Surface	467	<input type="checkbox"/>	<input type="checkbox"/>
Prod.	6 1/2	4 1/2	10.5	Surface	2772	205	Surface	2772	<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>

FORMATION LOG INTERVALS and TEST ZONES

Formation	Measured Depth		Check if applies		***All DST and Core analysis must be submitted to COGCC.*** Comments
	Top	Bottom	DST	Cored	
Smokey Hills	2601	2638	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

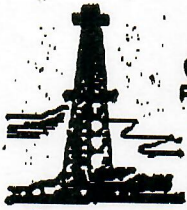
I hereby certify that the statements made in this form are, to the best of my knowledge, true correct, and complete.

Print Name: JUDY THRONEBERRY

Signed: Judy Throneberry

Title: REGULATORY SUPERVISOR

Date: 12/7/2001



CEMENTER'S WELL SERVICE, INC.

P.O. BOX 336220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712

OUR INVOICE NO 181937



Samedan

Date <i>10-12-01</i>	Well Owner <i>Oil Corporation</i>	Well No. <i>12-7</i>	Lease <i>Stallings</i>
County <i>Union</i>	State <i>Colorado</i>	Field	
Charge to <i>Excell Drilling Company</i>	Charge Code		
Address <i>Rig #2</i>	For Office Use Only		
City, State <i>Wray Colorado</i>			
Pump Truck No. <i>1204</i>	Code	Bulk Truck No. <i>1211</i>	Code
Type of Job	Depth	Ft. <i>2976</i>	To
Surface	Bottom of Surface	Ft.	To
Plug	Plug Landed @ <i>2735</i>	Ft.	Time On <i>19:15</i>
Production <i>4 1/2" casing 10.5"</i>	Pipe Landed @ <i>2778</i>	Ft.	Time Off <i>Plug Down @ 21:30 PM</i>

Reference No.	Description	Qty.	Meas.	Unit Price	Amount
	Pump Truck Charge				
<i>Yield 1.23</i>	Cement <i>Light Cement</i>	<i>130</i>	<i>SKS</i>	<i>WT 13.1 PPG</i>	
<i>1.26</i>	Poz. Mix <i>50/50</i>	<i>25</i>	<i>SKS</i>	<i>WT 14.2 PPG</i>	
	Calcium Chloride <i>10% salt</i>				
	Gel % Flo-Cele #Per Sack				
	Handling Charge				
	Hauling Charge				
	Additional Cement				
<i>4 1/2"</i>	<i>Centerizers</i>	<i>6</i>			
<i>"</i>	<i>Scratchers</i>	<i>7</i>			
<i>"</i>	<i>RFU shoe</i>	<i>1</i>			
<i>"</i>	<i>Latch down plug & Poffle</i>	<i>1</i>			
<i>Mixing Rate 4 RPM - Displacement Rate 6 RPM</i>					
<i>Circulate 5 PPLs cement to pit</i>					

Remarks: <i>Reflush w/ 10 PPLs Mud Flush</i>	Tax Reference Code	Sub Total
<i>Displace w/ 47 PPLs KCL</i>	State <i>2.9%</i>	Tax
<i>Landed plug w/ 2000 PST</i>	Disc.	Total

Truck No.	Code	State Mileage	Nebraska	Colorado	Wyoming	Other	Total Mileage
<i>1204</i>		Pump Truck		<i>55</i>			
<i>1211</i>		Bulk Truck		<i>55</i>			

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

Delivered By *Leon-Kenny*

Received By

Cement
Customer or His Agent



CEMENTER'S WELL SERVICE, INC.

P.O. BOX 336220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712

OUR INVOICE N^o 181934



Samedan

Date <i>10-15-01</i>	Well Owner <i>Oil Corporation</i>	Well No. <i>12-7</i>	Lease <i>Stallings</i>
County <i>Yuma</i>	State <i>Colorado</i>	Field	
Charge to <i>Excell Drilling Company</i>	Charge Code		
Address <i>Rig #2</i>	For Office Use Only		
City, State <i>Wray Colorado</i>			
Pump Truck No. <i>1704</i>	Code	Bulk Truck No. <i>1218</i>	Code
Type of Job	Depth	Fl. <i>488'</i>	To
Surface <i>7"</i>	Bottom of Surface	Fl. <i>473'</i>	To
Plug	Plug Landed @ <i>453'</i>	Fl.	Time On <i>01:00 AM</i>
Production	Pipe Landed @ <i>473'</i>	Fl.	Time Off <i>Plug Down @ 03:00 AM</i>

Reference No.	Description	Qty.	Meas.	Unit Price	Amount
	Pump Truck Charge				
	Cement Nod ✓	200	SKS		
	Poz. Mix				
	Calcium Chloride ✓	390			
	Gel % Flo-Cele <i>1/4</i> #Per Sack				
	Handling Charge				
	Hauling Charge				
	Additional Cement				
<i>7"</i>	<i>Centrifuge</i>	<i>1</i>			
<i>Mixing Rate 4 RPM - Displacement Rate 6 RPM</i> <i>Slurry Vol. 1.18 CU. FT./SK Slurry WT. 15.2 PPG</i> <i>6 SK Cement Slurry Per RPM</i>					

Remarks: <i>2.5 lb H₂O PPLS H₂O</i>	Tax Reference Code	Sub Total
<i>3.5 lb H₂O PPLS H₂O</i>	State <i>Colo 2.9%</i>	Tax
<i>3.5 lb H₂O PPLS Cement</i>	Disc.	Total

Truck No.	Code	State Mileage	Nebraska	Colorado	Wyoming	Other	Total Mileage
<i>204</i>		Pump Truck		<i>55</i>			
<i>218</i>		Bulk Truck		<i>55</i>			

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

By *Leon-Kenny-Charles*

Received By

James D. H. H.
Customer or His Agent