



INSTRUCTIONS

Upon request, geological information will be kept confidential for six months after the filing thereof.

CASING RECORD

SIZE	WT. PER FT.	GRADE	DEPTH LANDED	NO. SKS. CMT.	W.O.C.	PRESSURE TEST	
						Time	Psi
8 5/8	Set 109'	@115'	K.B. 115'	125 W 2% Ca.CL	(Surface Casing)		

CASING PERFORATIONS

Type of Charge	No. Perforations per ft.	From	Zone To	WRS
none				HHM
				JAM
				FJP
TOTAL DEPTH 5070'				JJD
PLUG BACK DEPTH none				FILE

RECORD OF SHOOTING AND/OR CHEMICAL TREATMENT

DATE	SHELL, EXPLOSIVE OR CHEMICAL USED	QUANTITY	ZONE		FORMATION	REMARKS
			From	To		
	none					

Results of shooting and/or chemical treatment:

DATA ON TEST

Depth of Pump_____feet.

If flowing well, did this well flow for the entire duration of this test without the use of swab or other artificial flow device?

SEE REVERSE SIDE

TEST RESULTS: Bbls. oil per day none API Gravity _____
Gas Vol. _____ Mcf/Day; Gas-Oil Ratio _____ Cf/Bbl. of oil
B.S. & W. _____ %; Gas Gravity _____ (Corr. to 15.025 psi & 60°F)

FORMATION RECORD

Give name, top, bottom and description of all formations encountered, and indicate oil, gas and water bearing intervals, cored sections and drill stem tests.

FORMATION NAME	TOP	BOTTOM	DESCRIPTION AND REMARKS
			See attached well summary