

State of Colorado

Oil and Gas Conservation Commission

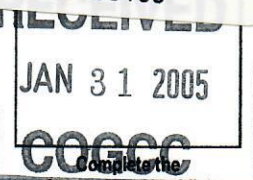
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)894-2100 Fax:(303)894-2109



LP

**COMPLETED INTERVAL REPORT**

This form is to be submitted or updated each time a new formation is completed or abandoned. This form shall be transmitted within 30 days of work. Additional information is found under Rule 308. Fill out a section for each formation completed or recompleted including all attempted completions. Attach as many pages as required to fully describe the work.



Attachment Checklist

1. OGCC Operator Number: <u>76175</u>		4. Contact Name and Telephone <u>GARY SANDLIN</u>		Oper OGCC Wellbore diagram Site facility diagram
2. Name of Operator: <u>SANDLIN OIL CORPORATION</u>		No: <u>303-292-3313</u>		
3. Address: <u>621 17th Street #2055</u>		Fax: <u>303-292-3969</u>		
City: <u>Denver</u> State: <u>CO</u> Zip: <u>80293</u>				

5. API Number: <u>05-123-06024-01</u>	6. County: <u>Baca</u>
7. Well Name: <u>Mayberry</u>	Well Number: <u>1-X</u>
8. Location (Qtr, Sec, Twp, Rng, Meridian): <u>NE NW 10-34S-41W</u>	

List in order of completion:

FORMATION: <u>NE NW 10-34S-41W</u>		<input type="checkbox"/> Producing	<input checked="" type="checkbox"/> Abandoned	<input type="checkbox"/> Shut-In	<input type="checkbox"/> Commingled
Perforations Gross Interval: Top <u>4035</u>	Bottom: <u>4040</u>	No. Holes: <u>10</u>	Size: <u>.42</u>	Open Hole Completion (check if yes) <input type="checkbox"/>	
Formation Treatment Describe:					

Test Information Date:		Hours:	Bbls Oil:	MCF Gas: <u>117</u>	Bbls H <sub>2</sub> O: <u>26</u>
Production Test Method: <u>Flowing</u>		Casing Pressure:	Flowing Tubing Pressure:		Choke Size:
API Gravity Oil:	<input type="checkbox"/> Oil <input type="checkbox"/> Condensate	BTU Gas:	<input type="checkbox"/> Wet <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/> Dry <input type="checkbox"/> Coal Gas	<input type="checkbox"/> Helium <input type="checkbox"/> Other:	Gas Disposition:
Calculated 24 Hr. Rate	Bbls Oil:	MCF Gas:	Bbls H <sub>2</sub> O:	GOR:	
Production Method:					

Tubing Size:	Setting Depth:	Packer Depth:
Reason for Non-Production: <u>Non-Commercial</u>		
Abandonment of Zone Date: <u>7-27-04</u>	Squeezed: <input type="checkbox"/> Y <input type="checkbox"/> N	Sacks Cement:
Bridge Plug Depth: <u>3200</u>	Sacks Cement on Top: <u>2 sacks</u>	

FORMATION: <u>NE NW 10-34S-41W</u>		<input type="checkbox"/> Producing	<input type="checkbox"/> Abandoned	<input checked="" type="checkbox"/> Shut-In	<input type="checkbox"/> Commingled
Perforations Gross Interval: Top <u>2904</u>	Bottom: <u>2926</u>	No. Holes: <u>36</u>	Size: <u>.42</u>	Open Hole Completion (check if yes) <input type="checkbox"/>	
Formation Treatment Describe:					

Test Information Date: <u>7-27-04</u>		Hours:	Bbls Oil:	MCF Gas:	Bbls H <sub>2</sub> O:
Production Test Method:		Casing Pressure:	Flowing Tubing Pressure:		Choke Size:
API Gravity Oil:	<input type="checkbox"/> Oil <input type="checkbox"/> Condensate	BTU Gas:	<input type="checkbox"/> Wet <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/> Dry <input type="checkbox"/> Coal Gas	<input type="checkbox"/> Helium <input type="checkbox"/> Other:	Gas Disposition:
Calculated 24 Hr. Rate	Bbls Oil:	MCF Gas:	Bbls H <sub>2</sub> O:	GOR:	
Production Method:					

Tubing Size:	Setting Depth:	Packer Depth:
Reason for Non-Production: <u>SI- Non Commercial</u>		
Abandonment of Zone Date:	Squeezed: <input type="checkbox"/> Y <input type="checkbox"/> N	Sacks Cement:
Bridge Plug Depth:	Sacks Cement on Top:	

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

Print Name: SANDLIN OIL CORPORATION Signed: Gary Sandlin  
 Title: GARY SANDLIN, PRESIDENT Date: 1-27-04

Morrow

Cherokee