



**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	24+0/0	16+0/0	65	0	120	4	0	120	CALC
SURF	14+3/4	9+5/8	36	0	2,685	1,210	0	2,685	CALC
1ST	8+3/4	4+1/2	11.6	0	8,942	1,780	2,685	8,942	CBL

ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
	SURF		120	0	2,685
	SURF		97	0	2,685

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WASATCH G	4,537	4,691	<input type="checkbox"/>	<input type="checkbox"/>	
FORT UNION	4,691	6,053	<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	6,053	6,273	<input type="checkbox"/>	<input type="checkbox"/>	
WILLIAMS FORK	6,273	8,367	<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	8,367	8,768	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,768		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Subsequent Form 5.

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

Signed: \_\_\_\_\_ Print Name: Joan Proulx

Title: Regulatory Analyst Date: 5/5/2011 Email: joan\_proulx@oxy.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400162273	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"/>
<u>Other Attachments</u>			
400162244	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400162267	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

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**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	REQ AS DRILLED - REPORTED WAS SAME AS PERMIT	7/22/2011 11:24:30 AM

Total: 1 comment(s)