



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

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

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	
GREELEY SAND	2,226		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,364		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	3,968		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,408		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,664		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,962		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

\_\_\_\_\_

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

Signed: \_\_\_\_\_ Print Name: LEWIS CAMP

Title: PRESIDENT Date: 5/23/2011 Email: NONE@GIVEN.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
2537322	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2537323	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b>Other Attachments</b>			
2537321	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

User Group	Comment	Comment Date
Permit	REQ'D LAS TRIPLE COMBO AND DIG. CBL FROM LEWIS CAMP.	3/2/2011 1:55:29 PM

Total: 1 comment(s)