

Cement work date: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
PERF & PUMP	1ST	7,060	700	2,488	7,070

Details of work:

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	
SUSSEX	4,420	4,470	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,780	7,035	<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,105	7,170	<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,504	7,700	<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	7,720	7,840	<input type="checkbox"/>	<input type="checkbox"/>	
MORRISON	7,920	7,990	<input type="checkbox"/>	<input type="checkbox"/>	
ENTRADA	8,104	8,144	<input type="checkbox"/>	<input type="checkbox"/>	
LYONS	8,742	8,898	<input type="checkbox"/>	<input type="checkbox"/>	
AMAZON	9,220	9,294	<input type="checkbox"/>	<input type="checkbox"/>	
COUNCIL GROVE	9,324	9,638	<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: Fabrianna Venaducci

Title: Contract Landman Date: 3/12/2012 Email: fabrianna@jameskaro.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"/>
	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"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)