



**STAGE/TOP OUT/REMEDIAL CEMENT**

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

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

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	
NIOBRARA	7,328		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,609		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,632		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Hard copies of logs were mailed to COGCC on 4/25/12

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

Signed: \_\_\_\_\_ Print Name: Tania McNutt

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: tmcnutt@nobleenergyinc.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400276808	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400276809	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"/>
400276807	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b>Other Attachments</b>			
400276803	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400276804	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400276806	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)