

# CEMENT JOB REPORT



CUSTOMER CONTINENTAL RESOURCES I		DATE 18-MAR-12	F.R. # 1001895606	SERV. SUPV. JOHN R WUDARCZYK										
LEASE & WELL NAME REINES #1-1H - API 05123348800000		LOCATION SEC 1 - 7 N - 60 W		COUNTY-PARISH-BLOCK Weld Colorado										
DISTRICT Brighton		DRILLING CONTRACTOR RIG # CYCLONE 12		TYPE OF JOB Surface										
SIZE & TYPE OF PLUGS		LIST-CSG-HARDWARE		MECHANICAL BARRIERS										
Cement Plug, Rubber, Top 9-5/8 in		Float Collar, Pop Valve, 9-5/8 - 8rd		MD	TVD									
		Guide Shoe, Cement Nose, 9-5/8 in		HANGER TYPES	MD									
		Centralizer, with Pins, 9-5/8 in			TVD									
MATERIALS FURNISHED BY BJ		LAB REPORT NO.		PHYSICAL SLURRY PROPERTIES										
		SACKS OF CEMENT	SLURRY WGT PPG	SLURRY YLD FT <sup>3</sup>	WATER GPS	PUMP TIME HR:MIN								
Fresh Water		0	8.34	0	0	00:00								
Type III + 1% CaCl <sub>2</sub> + .25% CF + .12% CD32 + .08% FL63		310	14.3	1.45	7.15									
Fresh Water		0	8.34	0	0	00:00								
Class G Cement		100	15.8	1.16	5.01									
Available Mix Water 200 Bbl.		Available Displ. Fluid 200 Bbl.		TOTAL		161.70								
HOLE		TBG-CSG-D.P.				COLLAR DEPTHS								
SIZE	% EXCESS	DEPTH	ID	OD	WGT.	TYPE	MD	TVD	GRADE	SHOE	FLOAT	STAGE		
13.5	50	590	8.921	9.625	36	CSG	590	590	J-55	590	528	0		
LAST CASING			PKR-CMT RET-BR PL-LINER			PERF. DEPTH		TOP CONN		WELL FLUID				
ID	OD	WGT	TYPE	MD	TVD	BRAND & TYPE		DEPTH	TOP	BTM	SIZE	THREAD	TYPE	WGT.
						NO PACKER		0			9.625	8RND	FRESH WATER	8.34
DISPL. VOLUME		DISPL. FLUID		CAL. PSI		CAL. MAX PSI		OP. MAX		MAX TBG PSI		MAX CSG PSI		MIX WATER
VOLUME	UOM	TYPE		WGT.	BUMP PLUG	TO REV.	SQ. PSI	RATED	Operator	RATED	Operator			
41.0	BBLS	Fresh Water		8.34	164	0	0	0	0	2816	1500	RIG		
<b>Circulation Prior to Job</b>														
Circulated Well: Rig <input checked="" type="checkbox"/> BJ <input type="checkbox"/>				Circulation Time: .5				Circulation Rate: 5 BPM						
Mud Density In: 8.34 LBS/GAL				Mud Density Out: 8.34 LBS/GAL				PV & YP Mud In: 0				PV & YP Mud Out: 0		
Gas Present: NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>				Units:				Solids Present at End of Circulation: NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>						
<b>Displacement And Mud Removal</b>														
Displaced By: Rig <input type="checkbox"/> BJ <input checked="" type="checkbox"/>				Amount Bled Back After Job: .5 BBLS										
Returns During Job: <input type="checkbox"/> NONE <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> FULL				Method Used to Verify Returns: VISUAL										
Cement Returns at Surface: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				Were Returns Planned at Surface: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES										
Pipe Movement: <input type="checkbox"/> ROTATION <input type="checkbox"/> RECIPROCATION <input checked="" type="checkbox"/> NONE <input type="checkbox"/> UNABLE DUE TO STUCK PIPE														
Centralizers: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES				Quantity: 3				Type: <input checked="" type="checkbox"/> BOW <input type="checkbox"/> RIGID						
Job Pumped Through: <input type="checkbox"/> CHOKE MANIFOLD <input type="checkbox"/> SQUEEZE MANIFOLD <input checked="" type="checkbox"/> MANIFOLD <input type="checkbox"/> NO MANIFOLD														
<b>Plugs</b>														
Number of Attempts by BJ: 0				Competition: 0				Wiper Balls Used: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES				Quantity:		
Plug Catcher Used: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES				Parabow Used: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES										
Was There a Bottom: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES				Top of Plug: 0 FT				Bottom of Plug: 0 FT						
<b>Squeezes (Update Original Treatment Report for Primary Job)</b>														
BLOCK SQUEEZE <input type="checkbox"/>				SHOE SQUEEZE <input type="checkbox"/>				TOP OF LINER SQUEEZE <input type="checkbox"/>				PLANNED <input type="checkbox"/> UNPLANNED <input checked="" type="checkbox"/>		
Liner Packer: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES				Bond Log: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES				PSI Applied: 0				Fluid Weight: 0 LBS/GAL		
<b>Casing Test (Update Original Treatment Report for Primary Job)</b>														
Casing Test Pressure: 0 PSI				With 0 LBS/GAL Mud				Time Held: 00 Hours 00 Minutes						
EXPLANATION: TROUBLE SETTING TOOL, RUNNING CSG, ETC. PRIOR TO CEMENTING: NONE														

# CEMENT JOB REPORT



## Shoe Test (Update Original Treatment Report for Primary Job)

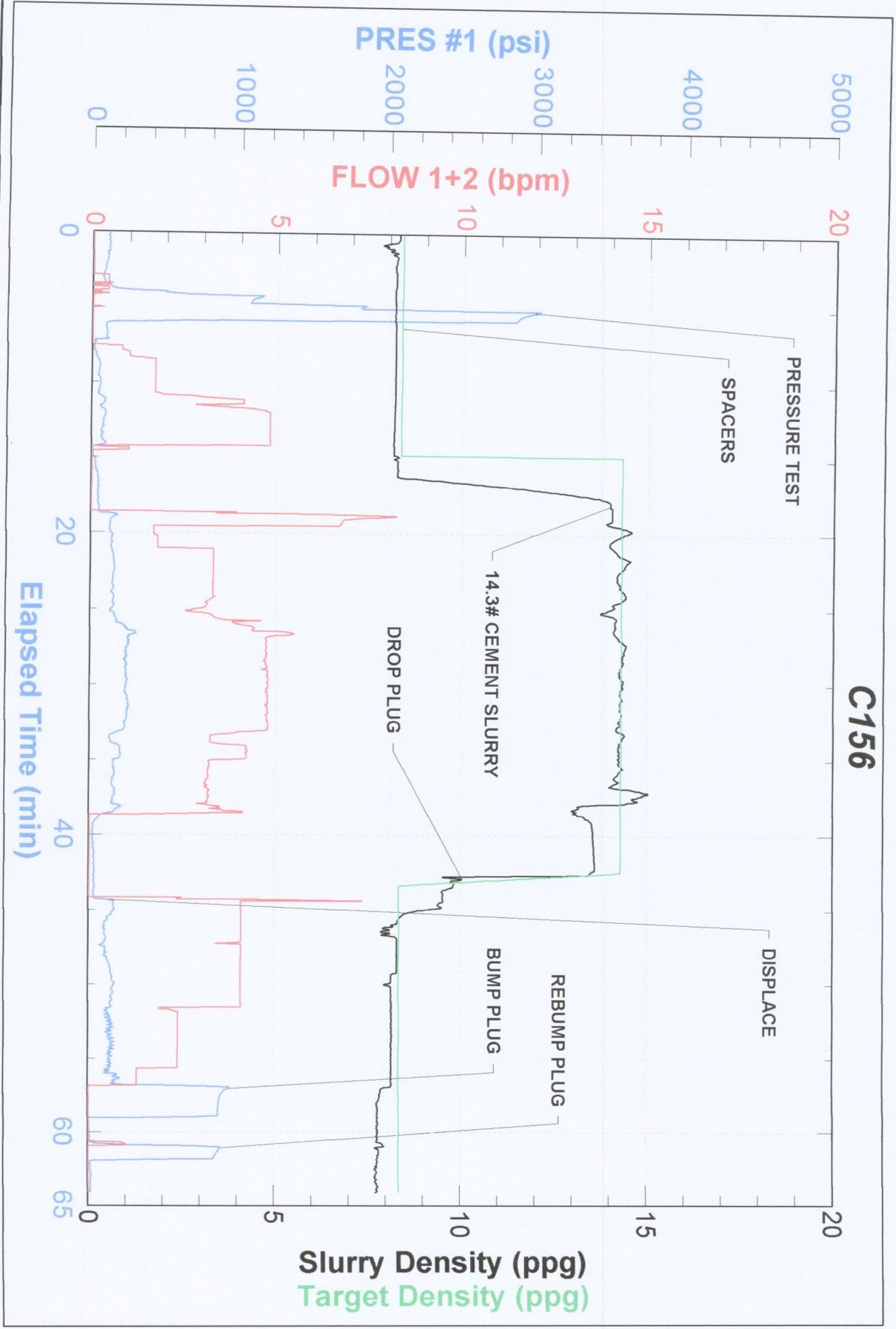
Depth Drilled out of Shoe: 0 FT	Target EMW: 0 LBS/GAL      Actual EMW: 0 LBS/GAL
Number of Times Tests Conducted: 0	Mud Weight When Test was Conducted: 0 LBS/GAL
Problems Before Job (I.E. Running Casing, Circulating Well, ETC) NONE	
Problems During Job (I.E. Lost Returns, Equipment Failure, Bulk Delivery, Foaming, ETC) NONE	
Problems After Job (I.E. Gas at Surface, Float Equipment Failed, ETC) NONE	

PRESSURE/RATE DETAIL						EXPLANATION	
TIME HR:MIN.	PRESSURE - PSI		RATE BPM	Bbl. FLUID PUMPED	FLUID TYPE	SAFETY MEETING: BJ CREW <input checked="" type="checkbox"/> CO. REP. <input checked="" type="checkbox"/>	
	PIPE	ANNULUS				TEST LINES 3011 PSI	CIRCULATING WELL - RIG <input checked="" type="checkbox"/> BJ <input type="checkbox"/>
21:45	0	0	0	0	0	ARRIVE ON LOCATION ( 80 MILES )	
22:15	0	0	0	0	0	SPOT TRUCKS	
23:15	0	0	0	0	0	PRE RIG UP SAFETY MEETING	
23:36	3011	0	0	0	H2O	PRESSURE TEST PUMPS AND LINES	
23:40	75	0	4.8	20	H2O	FRESH WATER	
23:52	237	0	4.7	77	CMT	BATCH UP AND PUMP 310 SKS TYPE III+.08%STATIC FREE+1%CACL+.25#/SACK CELLO FLAKE@14.3#	
00:17	0	0	0	0	H2O	DROP PLUG	
00:18	125	0	4	30	H2O	START DISPLACEMENT	
00:24	273	0	2.4	12	H2O	SLOW RATE	
00:28	938	0	0	0	H2O	BUMP PLUG @ 42 BBLS	
00:33	850	0	1	.5	H2O	RE SEAT PLUG	
00:33	0	0	0	0	H2O	CHECK FLOATS .5 BBLS BACK	
00:40	0	0	0	0	0	POST JOB RIG DOWN SAFETY MEETING	

BUMPED PLUG	PSI TO BUMP PLUG	TEST FLOAT EQUIP.	BBL.CMT RETURNS/ REVERSED	TOTAL BBL. PUMPED	PSI LEFT ON CSG	SPOT TOP OUT CEMENT	Service Supervisor Signature:
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	938	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	13	139	0	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	



BJ Services JobMaster Program Version 3.50  
Job Number: 1001895606  
Customer: CONTINENTAL RESOURCES  
Well Name: REINES # 1-1H



FIELD RECEIPT NO. 1001895606



**CUSTOMER**

CONTINENTAL RESOURCES INC

CREDIT APPROVAL NO.

PURCHASE ORDER NO.

CUSTOMER NUMBER

INVOICE NUMBER

**MAIL**

STREET OR BOX NUMBER

PO BOX 1032

CITY

STATE

ZIP CODE

**DATE WORK COMPLETED**

MO. 03

DAY 18

YEAR 2012

BHI REPRESENTATIVE  
JOHN R WUDARCZYK

WELL API NO:  
05123348800000

WELL TYPE:  
New Well

**DISTRICT**

BJS, BRIGHTON

JOB DEPTH (ft)  
590

WELL CLASS:  
Oil

**WELL NAME AND NUMBER**

REINES #1-1H

TD WELL DEPTH (ft)  
590

GAS USED ON JOB:  
No Gas

**WELL LOCATION :**

LEGAL DESCRIPTION  
SEC 1 - 7 N - 60 W

COUNTY/PARISH  
Weld

STATE  
Colorado

JOB TYPE CODE:  
Surface

PRODUCT CODE	DESCRIPTION	UNIT OF MEASURE	QUANTITY	LIST PRICE UNIT	GROSS AMOUNT	% DISC.	NET AMOUNT
100112	Calcium Chloride	lbs	292	1.220	356.24	50%	178.12
100295	Cello Flake	lbs	78	4.850	378.30	50%	189.15
488019	FP-6L	gals	3	99.250	297.75	50%	148.88
499632	Granulated Sugar	lbs	100	3.490	349.00	50%	174.50
499680	Static Free	lbs	24	38.700	928.80	50%	464.40
499703	Type III Cement	sacks	310	29.600	9,176.00	50%	4,588.00
SUB-TOTAL FOR Product Material					11,486.09	50.00%	5,743.05
A152	Personnel Per Diem Chrg - Cement Svc	ea	1	161.500	161.50	0%	161.50
M100	Bulk Materials Blending Charge	cu ft	426	4.170	1,776.42	50%	888.21
R798	Automatic Density System	job	1	1,530.000	1,530.00	50%	765.00
SUB-TOTAL FOR Service Charges					3,467.92	47.67%	1,814.71

**ARRIVE LOCATION :** MO. 03 DAY 17 YEAR 2012 TIME 21:44

**CUSTOMER REP:** KRISTOPHER HUBER

**SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS**

SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS

CUSTOMER AUTHORIZED AGENT

BHI APPROVED

FIELD RECEIPT NO. 1001895606



CUSTOMER CONTINENTAL RESOURCES INC CREDIT APPROVAL NO. PURCHASE ORDER NO. CUSTOMER NUMBER INVOICE NUMBER  
 20020335 - 00237828

MAIL STREET OR BOX NUMBER CITY STATE ZIP CODE  
 CONTINENTAL RESOURCES INC PO BOX 1032 ENID Oklahoma 73702-1032

INVOICE TO : DATE WORK MO. DAY YEAR BHI REPRESENTATIVE WELL API NO. WELL TYPE :  
 JOHN R WUDARCZYK 0512334880000 New Well

COMPLETED 03 18 2012 JOHN R WUDARCZYK JOB DEPTH (ft) WELL CLASS :  
 590 Oil

DISTRICT B.S. BRIGHTON WELL NAME AND NUMBER TD WELL DEPTH (ft) GAS USED ON JOB :  
 REINES #1-1H 590 No Gas

WELL LEGAL DESCRIPTION COUNTY/PARISH STATE JOB TYPE CODE :  
 SEC 1 - 7 N - 60 W Weld Colorado Surface

WELL LOCATION : PRODUCT CODE DESCRIPTION UNIT OF MEASURE QUANTITY PRICE UNIT LIST GROSS AMOUNT % DISC. NET AMOUNT

F053A Cement Pumping, 0 - 1000 ft 4hrs 1 2,650.000 2,650.00 50% 1,325.00  
 F090 Fuel per pump charge - cement pump/hr 2 61.000 122.00 0% 122.00

J050 Cement Head job 1 635.000 635.00 50% 317.50  
 J225 Data Acquisition, Cement, Standard job 1 1,635.000 1,635.00 50% 817.50

J390 Mileage, Heavy Vehicle miles 160 9,100 1,456.00 50% 728.00  
 J391 Mileage, Auto, Pick-Up or Treating Van miles 160 5,150 824.00 50% 412.00

J401 Bulk Delivery, Dry Products ton-mi 1569 3,030 4,754.07 50% 2,377.04  
 SUB-TOTAL FOR Freight/Delivery Charges 4,754.07 50.00% 2,377.04

DESCRIPTION VENDOR # WELL/A/E # CATEGORY FIELD ESTIMATE  
 Cement 9-56' 59 PO/BID #  
 LEASE NAME REINES 1-11

ARRIVE MO. DAY YEAR TIME SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS  
 03 18 2012 11:11

CUSTOMER REP. KRISTOPHER HUBER PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.  
 SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS

PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.  
 CUSTOMER AUTHORIZED AGENT

SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.  
 CUSTOMER AUTHORIZED AGENT

PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.  
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