

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	17+1/2	13+3/8	48	0	389	350	0	389	CALC
1ST	12+1/4	8+5/8	24	1090	1,716	75	1,450	1,716	CALC
OPEN HOLE	7+7/8			1716	5,610				

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf 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	
SHAWNEE	4,159		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
HEEBNER	4,352		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	4,395		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	4,762		<input type="checkbox"/>	<input type="checkbox"/>	
FORT SCOTT	4,848		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	4,910		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	5,055		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	5,183		<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	5,284		<input type="checkbox"/>	<input type="checkbox"/>	
MISSISSIPPIAN-ST LOUIS	5,340		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
SPERGEN	5,428		<input checked="" 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: MARK SHREVE

Title: PRESIDENT/COO Date: 10/5/2012 Email: MSHREVE@MULLDRILLING.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400333890	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"/>
400333896	DST Analysis	Yes <input checked="" type="checkbox"/>	No <input 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>			
400332481	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400332819	PDF-DUAL INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400332820	PDF-MICROLOG	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400332821	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400332823	PDF-SONIC	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	No CBL log run on the intermediate casing. Subsequent form 6 submitted has multiple plugs in open hole	10/11/2012 12:35:24 PM
Permit	Waiting on CBL log	10/9/2012 10:31:04 AM

Total: 2 comment(s)