

CEMENT JOB REPORT



CUSTOMER ENCANA OIL & GAS (USA) INC			DATE 21-JUN-13		F.R. # 1001996219		SERV. SUPV. STEPHEN J CARDOS							
LEASE & WELL NAME RINN NORTH #2-6-9 - API 05123338940000			LOCATION 9-2N-68W			COUNTY-PARISH-BLOCK Weld Colorado								
DISTRICT Brighton			DRILLING CONTRACTOR RIG # ENSIGN 122			TYPE OF JOB Surface								
SIZE & TYPE OF PLUGS		LIST-CSG-HARDWARE		MECHANICAL BARRIERS		MD	TVD	HANGER TYPES		MD	TVD			
Cement Plug, Rubber, Top 8-5/8 in		Cement Basket, Slip On, 8-5/8 in												
		Centralizer, with Pins, 8-5/8 in												
		Float Collar, AI Flap, 8-5/8 - 8rd												
		Float Shoe 8-5/8 - 8rd												
MATERIALS FURNISHED BY BJ				LAB REPORT NO.		PHYSICAL SLURRY PROPERTIES								
						SACKS OF CEMENT	SLURRY WGT PPG	SLURRY YLD FT³	WATER GPS	PUMP TIME HR:MIN	Bbl SLURRY	Bbl MIX WATER		
Fresh Water				N/A		0	8.34	0	0	00:00	45.22			
Fresh Water + Dye				N/A		0	0	0	0	00:00	10			
TypeIII+1.5%CaCl+15%CF				N/A		320	14.5	1.41	6.82	02:30	80.14	51.96		
Available Mix Water 300 Bbl.				Available Displ. Fluid 300 Bbl.				TOTAL		135.36		51.96		
HOLE			TBG-CSG-D.P.						COLLAR DEPTHS					
SIZE	% EXCESS	DEPTH	ID	OD	WGT.	TYPE	MD	TVD	GRADE	SHOE	FLOAT	STAGE		
12.25	40	750	8.097	8.625	24	CSG	750	750	J-55	796	755	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			8.625	8RND	WATER BASED	8.4
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				
48	BBLS	Fresh Water	8.34	238	0	0	0	0	2360	2000	RIG TANK			
Circulation Prior to Job														
Circulated Well: Rig <input checked="" type="checkbox"/> BJ <input type="checkbox"/>						Circulation Time: .5			Circulation Rate: 6 BPM					
Mud Density In: 8.4 LBS/GAL Mud Density Out: 8.4 LBS/GAL						PV & YP Mud In: 0			PV & YP Mud Out: 0					
Gas Present: NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> Units: 0						Solids Present at End of Circulation: NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>								
Displacement And Mud Removal														
Displaced By: Rig <input type="checkbox"/> BJ <input checked="" type="checkbox"/>						Amount Bled Back After Job: 1 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: 6			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														
Plugs														
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					
Squeezes (Update Original Treatment Report for Primary Job)														
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					
Casing Test (Update Original Treatment Report for Primary Job)														
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 3602 PSI
						CIRCULATING WELL - RIG <input checked="" type="checkbox"/> BJ <input type="checkbox"/>
04:00	0	0	0	0	N/A	YARD CALL
06:00	0	0	0	0	N/A	LEAVE YARD
06:35	0	0	0	0	N/A	ARRIVE ON LOCATION(RUNNING CASING)
06:40	0	0	0	0	N/A	SPOT TRUCKS
06:50	0	0	0	0	N/A	PRE RIG UP SAFETY MEETING
07:30	0	0	0	0	N/A	SAFETY MEETING
08:04	3605	0	0	0	H2O	PRESSURE TEST
08:10	156	0	4.9	20	H2O	FRESH WATER SPACER
08:13	164	0	4.9	10	H2O	DYED SPACER
08:16	275	0	5	88	CMT	BATCH/WEIGH/PUMP 14.5 LB CEMENT
08:40	0	0	0	0	H2O	DOWN/RELEASE PLUG
08:47	240	0	5	35	H2O	DISPLACEMENT
08:53	263	0	3.7	5	H2O	DROP RATE
08:55	276	0	2.7	8	H2O	DROP RATE
09:00	976	0	0	0	H2O	BUMP PLUG
09:01	270	0	0	0	H2O	DOWN/BLEED DOWN TO 270 LEFT ON CASING PER CUSTOMER
09:02	0	0	0	0	N/A	BLEED OFF PRESSURE / JOB DONE

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	976	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	32	168	270	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	



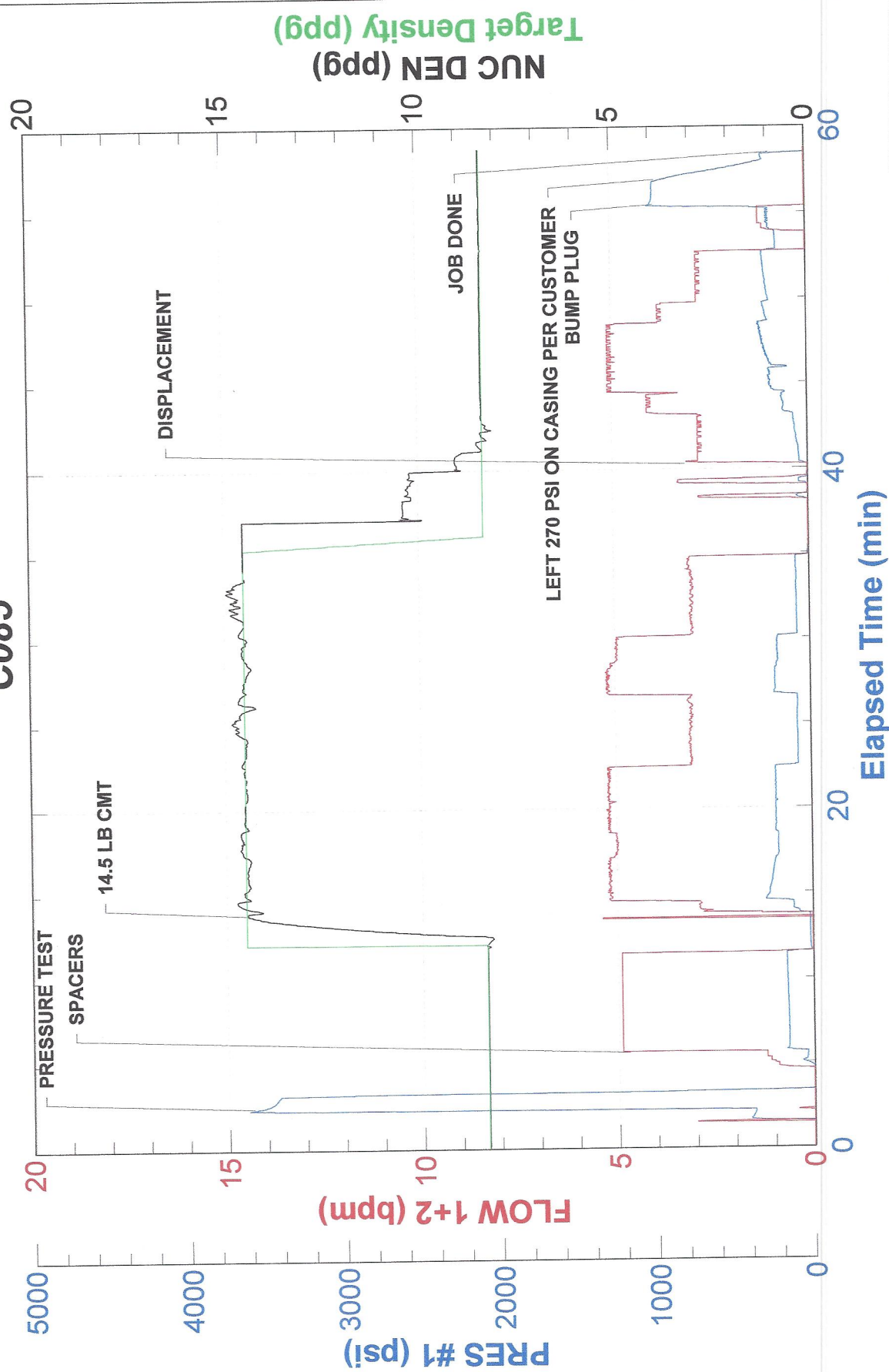
Baker Hughes JobMaster Program Version 3.60

Job Number: 1001996219

Customer: ENCANA

Well Name: RINN NORTH 2-6-9

C085





FIELD RECEIPT NO. 1001996219

CUSTOMER ENCANA OIL & GAS (USA) INC - XML				CREDIT APPROVAL NO.		PURCHASE ORDER NO.		CUSTOMER NUMBER 20011760 - 0040056573-1		INVOICE NUMBER	
MAIL INVOICE TO 370 17TH ST, STE 1700 US BANK TOWER				CITY DENVER		STATE Colorado		ZIP CODE 80202			
DATE WORK COMPLETED		MO. 06	DAY 21	YEAR 2013	BHI REPRESENTATIVE STEPHEN J CARDOS		WELL API NO: 05123338940000		WELL TYPE : New Well		
DISTRICT BJS, BRIGHTON					JOB DEPTH(ft) 796		WELL CLASS : Gas				
WELL NAME AND NUMBER RINN NORTH #2-6-9					TD WELL DEPTH(ft) 807		GAS USED ON JOB : No Gas				
WELL LOCATION :		LEGAL DESCRIPTION 9-2N-68W			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	452	1.290	583.08	55%	262.39	
100295	Cello Flake				lbs	48	5.100	244.80	55%	110.16	
488019	FP-6L				gals	4	104.250	417.00	55%	187.65	
499632	Granulated Sugar				lbs	50	3.840	192.00	55%	86.40	
499680	Static Free				lbs	26	40.700	1,058.20	55%	476.19	
499703	Type III Cement				sacks	320	31.700	10,144.00	55%	4,564.80	
SUB-TOTAL FOR Product Material								12,639.08	55.00%	5,687.59	
A152	Personnel Per Diem Chrg - Cement Svc				ea	1	210.000	210.00	0%	210.00	
M100	Bulk Materials Blending Charge				cu-ft	333	5.450	1,836.65	55%	826.49	
SUB-TOTAL FOR Service Charges								2,046.65	49.36%	1,036.49	
SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.					SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.						
CUSTOMER REP. SCOTT OSBORN					CUSTOMER AUTHORIZED AGENT X						
SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS					BHI APPROVED X <i>[Signature]</i>						



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MAIL INVOICE TO 370 17TH ST, STE 1700 US BANK TOWER				CITY DENVER		STATE Colorado		ZIP CODE 80202			
DATE WORK MO. DAY YEAR		BHI REPRESENTATIVE		WELL API NO:		WELL TYPE :		New Well			
COMPLETED 06 21 2013		STEPHEN J CARDOS		JOB DEPTH(ft)		WELL CLASS :		Gas			
DISTRICT BJS, BRIGHTON				TD WELL DEPTH(ft)		GAS USED ON JOB :		No Gas			
WELL NAME AND NUMBER RINN NORTH #2-6-9				STATE Colorado		JOB TYPE CODE :		Surface			
WELL LOCATION :				COUNTRY/PARISH Weld							
PRODUCT CODE		DESCRIPTION		UNIT OF MEASURE		QUANTITY		LIST PRICE UNIT		GROSS AMOUNT	
F053A		Cement Pumping, 0 - 1000 ft		4hrs		1		3,200.00		3,200.00	
F090		Fuel per pump charge - cement		pump/hr		2		70.250		140.50	
J050		Cement Head		job		1		830.000		830.00	
J225		Data Acquisition, Cement, Standard		job		1		2,130.000		2,130.00	
J390		Mileage, Heavy Vehicle		miles		48		11.850		568.80	
J391		Mileage, Auto, Pick-Up or Treating Van		miles		48		6.700		321.60	
		SUB-TOTAL FOR Equipment								7,190.90	
J401		Bulk Delivery, Dry Products		ton-mi		368		3.940		1,449.92	
		SUB-TOTAL FOR Freight/Delivery Charges								1,449.92	
		FIELD ESTIMATE								23,326.55	
										10,689.72	
										55%	
										0%	
										55%	
										55%	
										55%	
										55%	
										53.93%	
										55%	
										55.00%	
										54.17%	
										10,689.72	
										1,440.00	
										140.50	
										373.50	
										958.50	
										255.96	
										144.72	
										3,313.18	
										652.46	
										652.46	
										10,689.72	
ARRIVE MO. DAY YEAR TIME				SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.				SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.			
LOCATION : 06 21 2013 06:35											
CUSTOMER REP. SCOTT OSBORN				CUSTOMER AUTHORIZED AGENT				CUSTOMER AUTHORIZED AGENT			
SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS				BHI APPROVED							