

CEMENT JOB REPORT



CUSTOMER CARRIZO OIL & GAS INC XML			DATE 19-AUG-14		F.R. # 10011092065			SERV. SUPV. JOHN R WUDARCZYK					
LEASE & WELL NAME SHULL 3-35-9-60 - API 05123400280000			LOCATION 35-9N-60W			COUNTY-PARISH-BLOCK Weld Colorado							
DISTRICT Brighton			DRILLING CONTRACTOR RIG # EXTREME 19			TYPE OF JOB Surface							
SIZE & TYPE OF PLUGS		LIST-CSG-HARDWARE			MECHANICAL BARRIERS		MD	TVD	HANGER TYPES		MD	TVD	
Cement Plug, Rubber, Top 9-5/8 in		Float Collar, Pop Valve, 9-5/8 - 8rd											
		Float Shoe 9-5/8 - 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 + 2 lbs Red Dye				NA		0	8.34	0	0	00:00	15		
Type III Cmt + adds				NA		146	14.5	1.41	6.82	02:30	36.58	23.70	
Premium Lite Cmt + adds				NA		400	13	1.81	9.46	03:00	129.24	90.09	
Fresh Water				NA		0	8.34	0	0	00:00	108.23		
Available Mix Water 400 Bbl.			Available Displ. Fluid 400 Bbl.			TOTAL					289.05	113.79	
HOLE			TBG-CSG-D.P.						COLLAR DEPTHS				
SIZE	% EXCESS	DEPTH	ID	OD	WGT.	TYPE	MD	TVD	GRADE	SHOE	FLOAT	STAGE	
12.25		1440	8.921	9.625	36	CSG	1440	1440		1455	1413.8	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.
15.	16	65		70	70	NO PACKER	0	0	0	9.625	8 RND	WATER BASED	8.3
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		
108.5	BBLS	Fresh Water		8.34	1110	0	0	0	0	2816	2000	RIG	
Circulation Prior to Job													
Circulated Well: Rig <input checked="" type="checkbox"/> BJ <input type="checkbox"/>				Circulation Time: 1				Circulation Rate: 2 BPM					
Mud Density In: 8.3 LBS/GAL				Mud Density Out: 8.3 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"/>					
Displacement And Mud Removal													
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"/> RECIPROICATION <input checked="" type="checkbox"/> NONE <input type="checkbox"/> UNABLE DUE TO STUCK PIPE													
Centralizers: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES				Quantity: 14				Type: <input 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:				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 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: 1500 PSI				With 8.34 LBS/GAL Mud				Time Held: 00 Hours 15 Minutes					
EXPLANATION: TROUBLE SETTING TOOL, RUNNING CSG, ETC. PRIOR TO CEMENTING: NONE													
PRESSURE/RATE DETAIL						EXPLANATION							

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 type="checkbox"/>	
	PIPE	ANNULUS				TEST LINES	3106 PSI
						CIRCULATING WELL - RIG <input checked="" type="checkbox"/>	BJ <input type="checkbox"/>
07:15	0	0	0	0	0	LEAVE YARD	
09:30	0	0	0	0	0	ARRIVE LOCATION	
13:41	0	0	0	0	0	SPOT TRUCKS	
13:43	0	0	0	0	0	PRE-RIG UP SAFETY MEETING	
13:59	0	0	0	0	0	PRE- JOB SAFETY MEETING	
14:28	25	0	.8	2	H2O	LOAD LINES	
14:30	3106	0	0	0	H2O	PRESSURE TEST	
14:34	103		4	15	H2O	PUMP SPACER WITH DYE	
14:40	0	0	0	0	CMT	BATCH UP LEAD CEMENT	
14:50	202	0	4.2	124	CMT	PUMP LEAD	
15:16	0	0	0	0	CMT	BATCH UP TAIL	
15:25	151	0	3.6	31.5	CMT	PUMP TAIL	
15:37	0	0	0	0	NA	DROP PLUG	
15:40	252	0	6	108.5	H2O	DISPLACE	
16:12	1111	0	2	0	H2O	BUMPED PLUG	
16:17	1616	0	0	0	H2O	CASING TEST 1500 LBS FOR 15 MINS	
16:40	0	0	0	0	NA	WAIT 30 MINUTES FOR CEMENT TO FALL	
17:20	0	0	0	0	NA	END SERVICE	

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: _____
Y <input checked="" type="checkbox"/> N	1111	Y <input checked="" type="checkbox"/> N	52	279	0	Y <input checked="" type="checkbox"/> N	