

State of Colorado  
**Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)894-2100 Fax:(303)894-2109



FOR OGCC USE ONLY

**RECEIVED**  
JAN 31 2005  
**COGCC**

**DRILLING COMPLETION REPORT**

This form is to be submitted within 30 days of a well's completion. If the well is deepened or sidetracked, a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (completed interval Report). If the well has been plugged, submit Form 6 (Well Abandonment Report).

1. OGCC Operator Number: <u>76175</u>		4. Contact Name and Telephone <u>GARY SANDLIN</u>	
2. Name of Operator: <u>SANDLIN OIL CORPORATION</u>		No: <u>303-292-3313</u> Fax: <u>303-292-3969</u>	
3. Address: <u>621 17th Street #2055</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80293</u>			
5. API Number: <u>05-123-06024-01</u>		6. County: <u>BACA</u>	
7. Well Name: <u>MAYBERRY</u>		Well Number: <u>1-X</u>	
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>NE NW 10-34S-41W</u> Footage at Surface: <u>667 FNL; 1986' FNL</u> Was a directional survey run? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If directional, footage at Top of Prod. Zone: _____ If directional, footage at Bottom Hole: _____			
10. Field Name: <u>Greenwood</u>		10. Field Number: <u>33250</u>	
11. Federal, Indian or State Lease Number: _____			
12. Spud Date <u>6-9-2004</u>		13. Date TD <u>6-13-04</u>	
		14. Date Completed or D&A <u>7/28/04</u>	
16. Total Depth MD _____ TVD <u>4500</u>		17. Plug Back Total MD _____ TVD <u>3200</u>	
18. Was a Mud Log Run? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ** One copy of all electric and mud logs must be submitted.**		19. Elevations GR _____ KB _____	
20. List Electric Logs Run: <u>Cement Bond Log</u>			

**Complete the  
Attachment Checklist**  
Oper OGCC

Survey Plat	
Directional Survey	
Surface Equipment	
Technical Info Page	
Other	

**15 Well Classification**

☒ Dry    ☐ Oil    ☐ Gas  
☐ Coalbed  
☐ Stratigraphic    ☐ Disposal  
☐ Enhanced Recovery  
☐ Gas Storage    ☐ Observation  
☐ Other: \_\_\_\_\_

**21. CASING, LINER and CEMENT**

Submit contractor's cement job summary for each string cemented

String	Hole Size	Csg/Liner Size	Csg/Liner Wt (Lbs)	Csg/Liner Top	Csg/Tool Setting Depth	No. of Sacks	Cement Interval		Identify Method	
							Top	Bottom	CBL	Calc
Surf	12-1/4	8-5/8					Sur	1361	<input type="checkbox"/>	<input type="checkbox"/>
1st	7-7/8	5-1/2	14#		4494	300	2370	4494	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
2nd	7-7/8	5-1/2			1939	100	Sur	1939	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>

**22. FORMATION LOG INTERVALS and TEST ZONES**

Formation	Measured Depth		Check if applies		*** All DST and Core analysis must be submitted to COGCC.*** Comments
	Top	Bottom	DST	Cored	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

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

Print Name: SANDLIN OIL CORPORATION

Signed: \_\_\_\_\_

Title: President

Date: \_\_\_\_\_

1-27-04

GARY SANDLIN