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State of

Oil and Gas Conservation Commission

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



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FOR LOG USE ONLY

JAN 31 2005

COGCC

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Complete the

Attachment Checklist

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: 76175		4. Contact Name and Telephone <u>GARY SANDLIN</u>	
2. Name of Operator: <u>SANDLIN OIL CORPORATION</u>		No: <u>303-292-3313</u>	
3. Address: <u>621 17TH STREET, #2055</u>		Fax: <u>303-292-3969</u>	
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80293</u>			
5. API Number: <u>05-009-06024-00</u>		6. County: <u>BACA</u>	
7. Well Name: <u>MAYBERRY</u>		Well Number: <u>1</u>	
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>NE NW 10-34S-41W</u>			
Footage at Surface: _____		9. Was a directional survey run? <input type="checkbox"/> Y <input 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>6-06-04</u>		13. Date TD <u>6-06-04</u>	
		14. Date Completed or D&A <u>6-07-04</u>	
16. Total Depth MD _____ TVD <u>1989</u>		17. Plug Back Total MD _____ TVD <u>1717</u>	
18. Was a Mud Log Run? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		19. Elevations GR _____ KB _____	
** One copy of all electric and mud logs must be submitted.**			
20. List Electric Logs Run: _____			

15 Well Classification			
<input checked="" type="checkbox"/> Dry	<input type="checkbox"/> Oil	<input type="checkbox"/> Gas	
<input type="checkbox"/> Coalbed			
<input type="checkbox"/> Stratigraphic	<input type="checkbox"/> Disposal		
<input type="checkbox"/> Enhanced Recovery			
<input type="checkbox"/> Gas Storage	<input type="checkbox"/> Observation		
<input type="checkbox"/> 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
SFC	12 1/4	8 5/8	24	0	1361		0	1361	<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
Stage Cement									<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"/>

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: GARY SANDLIN, PRESIDENT

Date: JANUARY 26, 2005



SANDLIN OIL CORPORATION

621 17th Street, Suite 2055
Denver, Colorado 80293
Phone 303-292-3313
Fax 303-292-3969

January 28, 2005

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801
Denver, Colorado 80203
Attention: Linda Pavelka

Re: Violation Notice
Mayberry 1, Mayberry 1-X
NE NW Sec. 10-34S-41W
Baca County, Colorado



Dear Linda:

Reference the violation notice on the above captioned wells, Gary has prepared, pursuant to your telephone conversation earlier this week, the following forms:

Form 5, Form 6 - Mayberry 1

Form 2, Form 5 and Form 5A, Mayberry 1-X (sidetracked hole)

I furnished both you and Diane production reports on the Mayberry 1 earlier this week and I believe those reports should be Mayberry 1-X, showing TA.

We are hopeful these reports are what you need to clear this matter up.

Also, please advise me if I need to change the production reports before the information is put on the Internet. I have mailed those reports to Diana so I will need to correct if they do, in fact, need to read the Mayberry 1X.

Thank you for your help in this matter. If you have any questions regarding the forms it would probably be better to talk to Gary.

Thanks again.

Sincerely,

SANDLIN OIL CORPORATION

Kathie D. Sandlin

KDS:s