

**New Well Summary - Horizontal**

Licence: \_\_\_\_\_

Well Name & Location: \_\_\_\_\_ WPM  
 (as noted on well licence)

**Elevations:**

Ground Elev: \_\_\_\_\_

Surface Location: \_\_\_\_\_ WPM

Cut or fill: \_\_\_\_\_

Engineer: \_\_\_\_\_

With: \_\_\_\_\_

Revised GE: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Rig K.B.: \_\_\_\_\_

Push: \_\_\_\_\_

Rig Name: \_\_\_\_\_  
 and Number

Well KB: \_\_\_\_\_

**SPUD DATE & TIME:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ @ \_\_\_\_\_ hrs.

IT & M notified? Yes

<b>SURFACE CASING:</b>	IT & M Notified? Yes	Surface TD: _____m
Casing run: _____/_____/_____	# of Joints: _____	Size: _____mm
Weight: _____kg/m	Grade: _____	Landed at: _____m
Cement: _____t of _____ & _____ % CaCl <sub>2</sub>		Returns: _____m <sup>3</sup>
Plug Down: _____ hrs	Cement Co: _____	Kick-Off Point for Build: _____m

<b>INTERMEDIATE CASING:</b>	IT & M Notified? Yes	TD Date: _____m	TD: _____
Casing run: _____/_____/_____	# of Joints: _____	Size: _____mm	
Weight: _____kg/m	Grade: _____	Landed at: _____m	
Fill: _____t of _____	Tail: _____t of _____		
Calc. Cement Top: _____m	Cement Co: _____	Returns: _____m	Plug Down: _____ hrs

<b>FIRST LEG:</b>	Date: _____/_____/_____	Kick-Off Point: _____m
TD Date & Time: _____/_____/_____ @ _____ hrs	TMD: _____m	TVD: _____m
<b>Submit Directional Surveys with tours.</b>		
Bottom Hole Co-ordinates: _____ m <u>West</u> of Surface LSD _____ m <u>North</u>		
<b>Misc. Details:</b> _____		

<b>SECOND LEG:</b>	Date: _____/_____/_____	Kick-Off Point: _____m
TD Date & Time: _____/_____/_____ @ _____ hrs	TMD: _____m	TVD: _____m
<b>Submit Directional Surveys with tours.</b>		
Bottom Hole Co-ordinates: _____ m <u>West</u> of Surface LSD _____ m <u>North</u>		
<b>Misc. Details:</b> _____		

Fluid Loss: <u>YES</u>	Volume: _____	Depth: _____
Displacement Fluid: _____	Bridge Plug Set at: _____m	
Rig Release: _____/_____/_____ @ _____ hrs	Well Status: _____	
Rig Moving To: _____	<i>(Waiting on Service Rig or Plugged &amp; Abandoned Dry)</i>	

**Weekly Report:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ @ 0800: \_\_\_\_\_  
 (Date)

Remarks: \_\_\_\_\_

Tours \_\_\_\_\_

Sample \_\_\_\_\_

Well Check: \_\_\_\_/\_\_\_\_/\_\_\_\_