

API No.
081-23561-A
OTC/OCC Operator No.
20585

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002C  
(Rev. 1996)

OKLAHOMA CORPORATION COMMISSION  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4 (h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4 (h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name				OCC District
*Operator	New Dominion			OCC/OTC Operator No 20585
*Well Name/No.	- Mazkoori #1			County
*Location	<u>C</u> 1/4 <u>NW</u> 1/4 <u>SW</u> 1/4 ___ 1/4	Sec	2	Twp
				12N
				Rge
				5E

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date						7-10-00
*Size of Drill Bit (Inches)						
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)						4.500
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level						4408
Type of Cement (API Class)						H
In first (lead) or only slurry						
In second slurry						
In third slurry						
Sacks of Cement Used						75
In first (lead) or only slurry						
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft) (14.X15.)						84
In first (lead) or only slurry						
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)						600
Cement left in pipe (ft)						0

*Amount of Surface Casing Required (from Form 1000)	ft.
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*Was cement circulated to Ground Surface ___ Yes ___ No	*Was Cement Staging Tool (DV Tool) used? ___ Yes ___ No
*Was Cement Bond Log run? ___ Yes ___ No (If so, Attach Copy)	*If Yes, at what depth? ft

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

\* Designates items to be completed by Operator.  
Items not so designated shall be completed by the Cementing Company.

Remarks

\*Remarks


**CEMENTING COMPANY**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.

  
 \_\_\_\_\_  
 Signature of Cementer or Authorized Representative

**OPERATOR**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.

  
 \_\_\_\_\_  
 Signature of Operator or Authorized Representative

Name & Title Printed or Typed Werner Roseman Service Supervisor	
Cementing Company HALLIBURTON	
Address 7700 BALL RD	
City FT SMITH	
State AR	Zip 72908
Telephone (AC) Number (501) 648-7002	
Date 7-10-00	

Name & Title Printed or Typed Cindy L. Wright, Production Clerk	
Operator New Dominion, L.L.C.	
Address P.O. Drawer 369	
City Stillwater	
State OK	Zip 74076
Telephone (AC) Number (405) 377-1177	
Date 7/10/00	

**INSTRUCTIONS**

1. A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
- B) An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
- C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
  
2. Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
  
3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
  
4. **IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**