



PETROLEUM SERVICES DIRECTION
DATABASE & PATRIMONY DEPARTMENT
Cores Storage Services

REQUEST TO EXAMINE / SAMPLE CORE

Direction: _____ Depart./Service: _____
Name: _____
Phone No.: _____

PLEASE COMPLETE ONE FORM FOR EACH DRILL HOLE YOU REQUEST TO EXAMINE/SAMPLE

Drill Hole Name : _____ Short Hole Name.: _____
Drilled by: _____ Year: _____ Permit: _____
Permit / Concession / Open Bloc Name: _____ Owned by : _____

Sampling Purpose: Geochemistry Sedimentology Petrophysics
 Biostratigraphy Other

If other please specify: _____

Studies Framework : TCM OCM Others

If other please specify _____

Hierarchy Visa

RESERVED TO DSP

Deputy Manager: _____ **DSP Manger :** _____

- A separate form must be completed for each drill hole you wish to examine/ sample
- Once approval has been obtained, arrange a date to examine/sample with the Core Facility Manager
- Two ETAP technicians or workers will be at your disposal
- Applicants are required to provide their own sample bags, marker pens and vials, ...
- Some core/cuttings intervals may be excluded from the sampling request if available material is limited
- The sample is free but the consulting room and the technicians/workers will be charged
- No Sample will be done without
 - Explicit permission of the work
 - The necessary authorization and/or Approval of the Scientific Committee
- Applicant has the right to consult the previous non-confidential well studies (Reports- plugs - thin section- ...)
- Applicant has to present Accord for Confidential well Studies
- Applicant agree to supply a digital copy of all results and reports within Six Months of Sampling



**PLEASE COMPLETE ONE FORM FOR EACH
DRILL HOLE SAMPLED**

SAMPLING DETAILS

Date of Examination/Sampling: _____ Drill Hole Name.: _____

| Interval Sampled | Core/Cuttings | Details of Sample |
|------------------|---------------|-------------------|
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I agree to supply a digital copy of all results and reports within Six Months of Sampling

Name & Surname : _____

Signature: _____ Position: _____

Hierarchy Visa

Name & Surname : _____ Signature: _____

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