



**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well       Re-Entry       Workover
- Oil       WSW       SWD       SIOW
- Gas       D&A       ENHR       SIGW
- OG       GSW       Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic       Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

- Deepening       Re-perf.       Conv. to ENHR       Conv. to SWD
- Conv. to GSW
- Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE       NW       SE       SW

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls

Dewatering method used: \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**AFFIDAVIT**

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

**KCC Office Use ONLY**

- Letter of Confidentiality Received  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_



1052307

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. \_\_\_\_\_ Producing Method:  Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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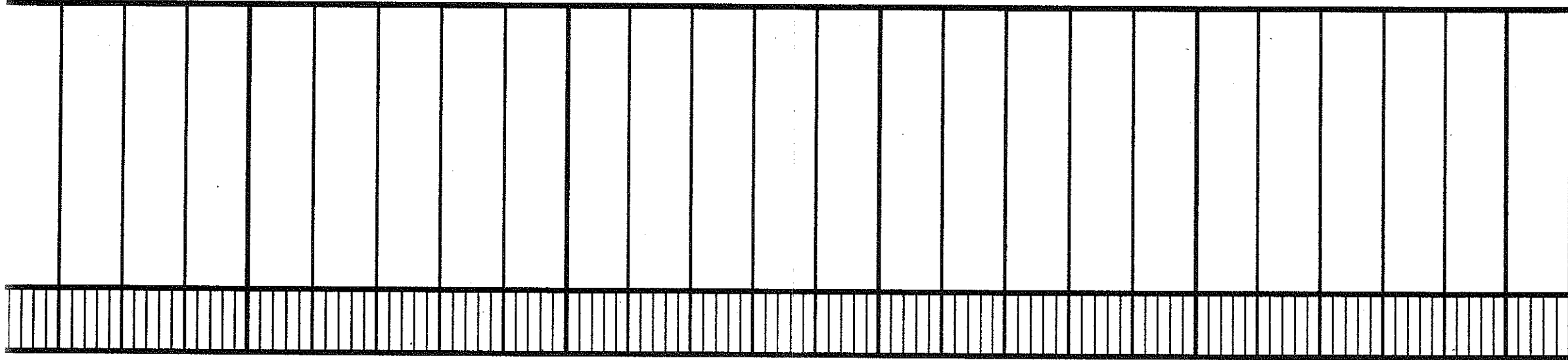
Form	ACO1 - Well Completion
Operator	Downing-Nelson Oil Co Inc
Well Name	JENNINGS 1-
Doc ID	1052307

Tops

Name	Top	Datum
Top Anhydrite	1437	+826
Base Anhydrite	1470	+793
Heebner	3750	-1487
LKC	3800	-1537
BKC	4094	-1831
Fort Scott	4258	-1995
Cherokee Shale	4275	-2012
Sherokee Sand	4302	-2039
Mississippi	4375	-2112
Osage	4392	-2129
Gilmore City	4452	-2189





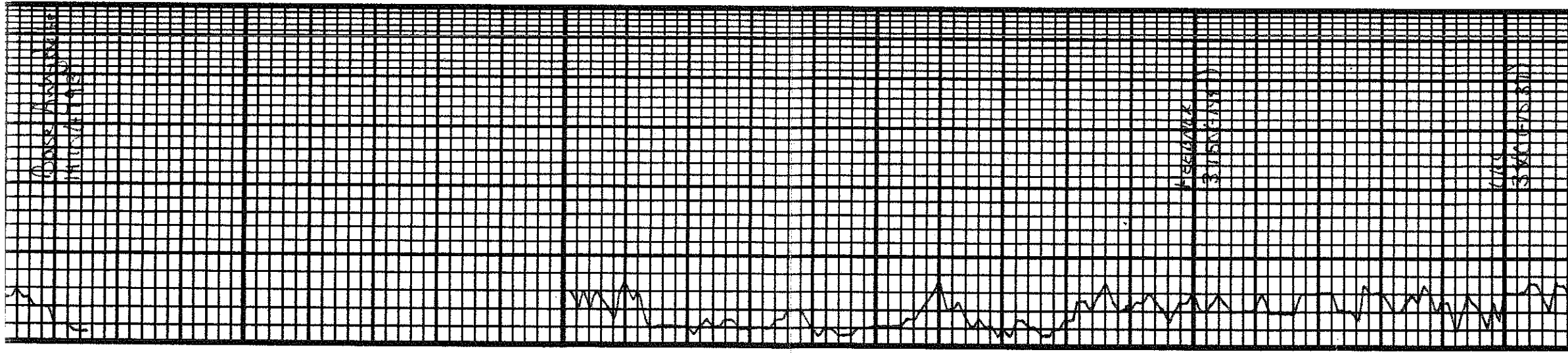


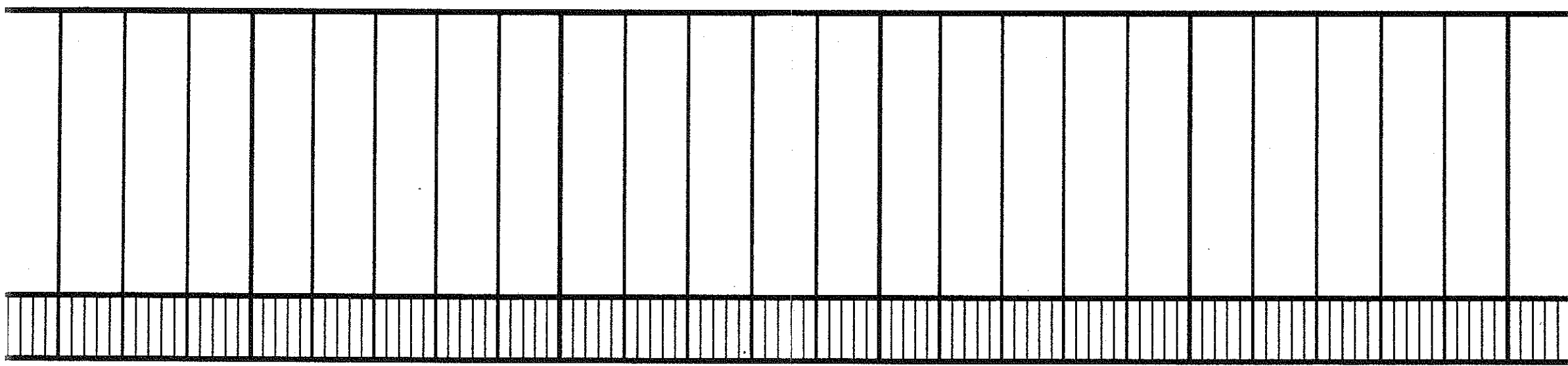
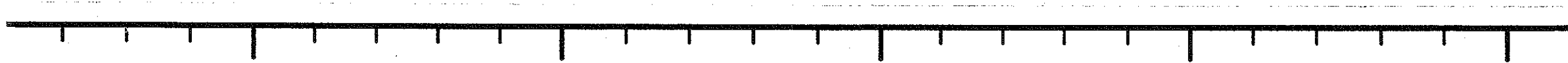
3650

3700

50

3800





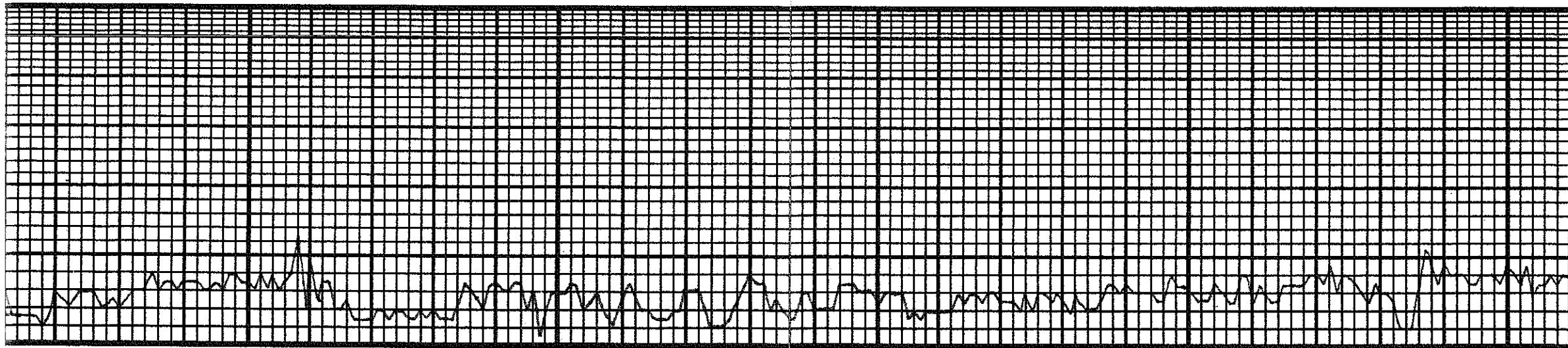
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3900

50

4000

50









# ALLIED CEMENTING CO., LLC. 038652

Federal Tax I.D.# 20-5975804

OFFICE: P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT: ED

DATE <u>7-3-11</u>	SEC <u>3</u>	TWP. <u>20</u>	RANGE <u>20</u>	CALLED OUT <u>4:00 PM</u>	ON LOCATION <u>7:00 PM</u>	JOB START <u>7:30 AM</u>	JOB FINISH <u>11:30 AM</u>
WELL # <u>1-3</u>		LOCATION <u>Alex Zouder 951 1/2 E N/5</u>		COUNTY <u>Pawnee</u>	STATE <u>K.S.</u>		
OLD OR (NEW) (Circle one)							

CONTRACTOR Discovery Rig 4

TYPE OF JOB Surface

HOLE SIZE 12 1/2" T.D. 523'

CASING SIZE 8 1/2" DEPTH 522'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX 800' MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. 42'

DISPLACEMENT 30 1/2 bbl

EQUIPMENT

PUMP TRUCK CEMENTER Mike M

# 224 HELPER Bobby R

BULK TRUCK

# 482 DRIVER Bill

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:  
Rig run 8 1/2" Surface Pipe  
Circulate The Hole  
mix Cement & Then Displace  
It Down Cement did circulate  
To Surface

CHARGE TO: Dowling + Nelson oil

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

To Allied Cementing Co., LLC.  
You are hereby requested to rent cementing equipment  
and furnish cementer and helper(s) to assist owner or

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED 250 sk Comm  
32cc 28 gal

COMMON	<u>250</u>	@	<u>13.50</u>	<u>3.375.00</u>
POZMIX		@		
GEL	<u>5</u>	@	<u>20.25</u>	<u>101.25</u>
CHLORIDE	<u>8</u>	@	<u>51.50</u>	<u>412.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>250</u>	@	<u>2.25</u>	<u>562.50</u>
MILEAGE	<u>250 x 19 x .10</u>			<u>475.00</u>
TOTAL				<u>4.925.25</u>

SERVICE

DEPTH OF JOB	<u>522'</u>		
PUMP TRUCK CHARGE			<u>991.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>19</u>	@	<u>7.00</u> <u>133.00</u>
MANIFOLD		@	
		@	
		@	
TOTAL <u>1124.00</u>			

PLUG & FLOAT EQUIPMENT

<u>1-8 1/2" Brass plate</u>	@	<u>67.30</u>	<u>67.30</u>
<u>1-8 1/2" Rubber Plug</u>	@	<u>74.00</u>	<u>74.00</u>
	@		
	@		
	@		

*Thank you*

# ALLIED CEMENTING CO., LLC. 038690

Federal Tax I.D.# 20-5975804

REMIT TO: P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Great Bend KS

DATE 2-9-11	SEC. 3	TWP. 20	RANGE 20	CALLED OUT	ON LOCATION	JOB START 6:00 AM	JOB FINISH 7:00 PM
LEASE Jennings	WELL # 1-3	LOCATION Alexander 9 South			COUNTY Pawnee	STATE KS	
OLD OR <u>NEW</u> (Circle one)		1 1/2 East North into					

CONTRACTOR Discovery 4  
 TYPE OF JOB Rotary Plug  
 HOLE SIZE 7 7/8 T.D. 4462  
 CASING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE 4 1/2 DEPTH 1450  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. \_\_\_\_\_  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_

OWNER Downing + Nelson  
 CEMENT  
 AMOUNT ORDERED 180 SX 60/40 7% Gel  
1/4 flo seal

**EQUIPMENT**  
 PUMP TRUCK CEMENTER Wayne-D  
 # 366 HELPER Bob - Gary  
 BULK TRUCK  
 # 341 DRIVER Bill  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>108</u>	@	<u>13.50</u>	<u>1458.00</u>
POZMIX	<u>72</u>	@	<u>7.55</u>	<u>543.60</u>
GEL	<u>6</u>	@	<u>20.25</u>	<u>121.50</u>
CHLORIDE		@		
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>180</u>	@	<u>2.25</u>	<u>405.00</u>
MILEAGE	<u>180 x 1.9 x .10</u>			<u>372.00</u>
TOTAL				<u>2870.10</u>

**REMARKS:**  
1st plug 1450 mix 50SX  
2nd plug 600 mix 60SX  
3rd plug 60 mix 20SX  
Rat 30SX  
Mouse 20SX

**SERVICE**

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>991.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>19.</u>	@	<u>7.00</u> <u>133.00</u>
MANIFOLD		@	
		@	
		@	
TOTAL <u>1124.00</u>			

CHARGE TO: Downing + Nelson  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or

	@		
	@		
	@		
	@		
	@		