



**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      Date Reached TD      Completion Date or  
Recompletion Date           Recompletion Date

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: \_\_\_\_\_



1055222

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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Customer	G&J	Stage	#1
Customer Acct #		Section	32
Well Name	NY #11-2	TWP	33S
Charge To		RGE	14E
Mailing Address		County	Montgomery
City & State		Formation	Wayside
Zip Code		Perfs	676 - 696 702 - 709 55 holes

Code	Vehicles, Equipment and Mileage	Quantity	Unit	Price per Unit	
5102	2250 HP PUMP	1	PER JOB	3275.00	\$ 3,275.00
5106	BLENDER TRUCK (0-20 BPM)	1	PER JOB	1050.00	\$ 1,050.00
5111	FRAC VAN	1	PER JOB	725.00	\$ 725.00
5116B	IRON TRUCK W/ BOOM	1	PER JOB	650.00	\$ 650.00
5115	BALL INJECTOR	1	PER JOB	100.00	\$ 100.00
0		0		0.00	\$ -
0		0		0.00	\$ -
0		0		0.00	\$ -
0		0		0.00	\$ -
0		0		0.00	\$ -
0		0		0.00	\$ -
SUBTOTAL					\$ 5,800.00
40% EQUIPMENT DISCOUNT					\$ 2,320.00
EQUIPMENT TOTAL					\$ 3,480.00

Chemical Treatment and Water					
	FRAC GEL ( GA-40W)	150.0	POUNDS	5.20	\$ 780.00
	BACHCIDE	2.0	GALLONS	30.00	\$ 60.00
	BREAKER (LEB-4)	0.5	GALLONS	187.00	\$ 93.50
	CLAY STAY (CS-250)(CS-702)	1.0	GALLONS	37.00	\$ 37.00
	STIMFLO (FBA)	1.0	GALLONS	40.00	\$ 40.00
	BREAKER AMMONIUM PERSULFATE	10.0	POUNDS	4.86	\$ 48.60
	15% HCL ACID (CHARGE FOR INHIBITOR IN ADDITION)	300.0	GALLONS	1.70	\$ 510.00
	ACID INHIBITOR (AI-260)	1.0	GALLONS	46.00	\$ 46.00
		0.0		0.00	\$ -
		0.0		0.00	\$ -
		0.0		0.00	\$ -
		0.0		0.00	\$ -
		0.0		0.00	\$ -
CHEMICAL TOTAL					\$ 1,615.10

Sand					
2102	12/20 BROWN (bulk)	7,000	POUNDS	\$0.27	\$ 1,890.00
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
SAND TOTAL					\$ 1,890.00

Water and Chemical Transport					
5109	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER MILE	\$315.00	\$ 315.00
0		0		\$4.00	\$ -
5310A	ACID TRANSPORT	1	/HR	\$140.00	\$ 140.00
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
TRANSPORT TOTAL					\$ 455.00

Frac Valves					
5604	3 INCH FRAC VALVE	1	PER WELL (3 DAYS)	\$100.00	\$ 100.00
FRAC VALVE TOTAL					\$ 100.00

Miscellaneous Costs					
4326	BALL SEALERS, 7/8 INCH, RCN (SG 1.3)	103	/BALL	\$3.00	\$ 309.00
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
MISC. TOTAL					\$ 309.00

SUB TOTAL					10,169.10
40% EQUIPMENT DISCOUNT (FROM ABOVE)					2,320.00
20% MATERIALS DISCOUNT					873.82
SALES TAX					63.69
<b>DISCOUNTED TOTAL</b>					<b>\$ 7,038.97</b>

DISCOUNT  
( GOOD IF PAID WITHIN 30 DAYS)

CUSTOMER or AGENTS SIGNATURE \_\_\_\_\_

COWS FOREMAN \_\_\_\_\_

CUSTOMER or AGENT (PLEASE PRINT) \_\_\_\_\_

DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of this form or in the customer's account records at our office, and conditions of service on the back of this form are in effect for services identified on this form

*[Signature]*  
4-11-11



TREATMENT REPORT  
FRAC AND ACID

Customer	G&J	Stage	#1
Customer Acct #	0	Section	32
Well No.	NY #11-2	TWP	33S
Charge To	0	RGE	14E
Mailing Address	0	County	Montgomery
City & State	0	Formation	Wayside
Zip Code	0	ARRIVED ON LOCATION	DEPARTED

Type of Treatment	
SW	
Chemicals	
FRAC GEL ( GA-40W)	
BACHCIDE	
BREAKER (LEB-4)	
CLAY STAY (CS-250)(CS-702)	
STIMFLO (FBA)	
BREAKER AMMONIUM PERSULFATE	
15% HCL ACID (CHARGE FOR INHIBITOR IN ADDITION)	
ACID INHIBITOR (AI-260)	
0	
0	
0	
Well Data	
CASING WEIGHT	
TUBING SIZE	2 7/8 6.5#
TUBING WEIGHT	
TOTAL DEPTH	
PLUG DEPTH	
PACKER DEPTH	
OPEN HOLE	

TRUCK #	DRIVER	TRUCK #	DRIVER
560-T75	Ryan L.		
423	James B.		
474	Cody S.		
499-T115	Roland P.		
550	Mark J.		
Rider 423	Jason R.		
498	Roger S.		
Rider 498	Dusty		
578-ENG	Greg H.		
Perfs and Formation			
676 - 696 702 - 709			
55 holes			

Stage	BBL'S Pumped	Proppant PPG	INJ Rate	Sand/Stage	PSI	TIME	PSI
						BREAKDOWN	1097
Breakdown	3		1 - 4		0 - 1097	START PRESS.	0
						END PRESS.	
Acid	5		1 - 4		401 - 2345	BALL OFF	3081
Acid Flush	20		2 - 8		1041 - 3081	ROCK SALT	
						ISIP	450
Pad	24		5 - 16		579 - 761	5 MIN	381
						10 MIN	
12/20 sand	15	0.50	16 - 17	300 lbs	741 - 757	15 MIN	
12/20 sand	14	1.00	17	600 lbs	730 - 750	MIN RATE	3
12/20 sand	22	1.50	16	1400 lbs	710 - 780	MAX RATE	17
12/20 sand	59	2.00	16	4860 lbs	735 - 1092	DISPLACEMENT	3.9
Flush	20		16 - 17		871 - 927		

Remarks

Spotted 100 gallons of acid

Pressure tested to 3800 psi, max pressure is 3500 psi

Dropped 78 balls during acid stage, balled off at 3081 psi

Dropped 25 balls during the sand stages

Authorization \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_



Prepared by: Consolidated Oil Well Services

Company Name: 68J 011

Well Name: NY#11-2

Field: 32-33S-14E

Formation: Mayside

County: MG.

State: KS.

Job Date: 04/11/11

Comments: Acid Sand Fac

Fluids: 154 Bbl. Saltwater 300 Gal. 5% Acid

Proppants: 25 Balls

Average Rate: 15

Average STP: 700

Tubing:

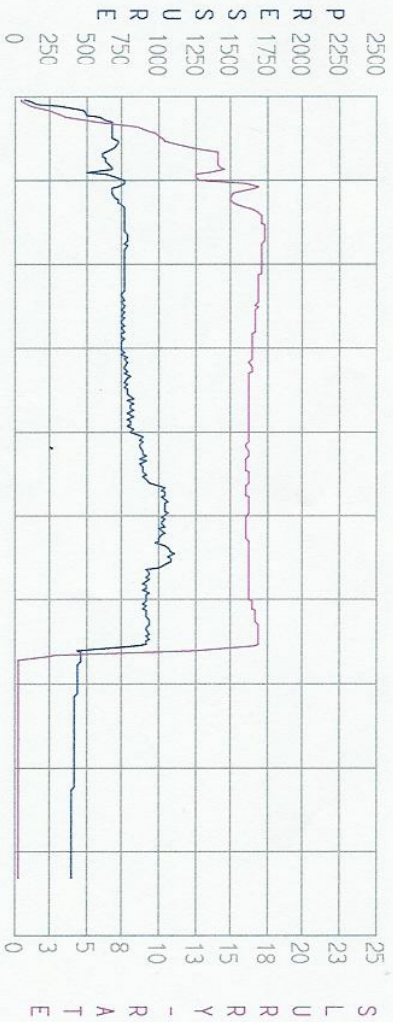
Casing: 2 7/8

Packer:

Filename: 10102203

Closure Pres: 4000

### LINEAR PLOT



Elapsed Time (min), Start at 16:09:40

Prepared by: Consolidated Oil Well Services

### LINEAR PLOT

Company Name: G&J Oil

Well Name: NY#11-2

Field: 32-33S-14E

Formation: Mayside

County: MG.

State: Ks.

Job Date: 04/11/11

Comments: Acid Balloff

Fluids: 18 Bbl. Saltwater 300 Gal. 15%

Proppants: 70 Balls

Average Rate: 5

Average STP: 1800

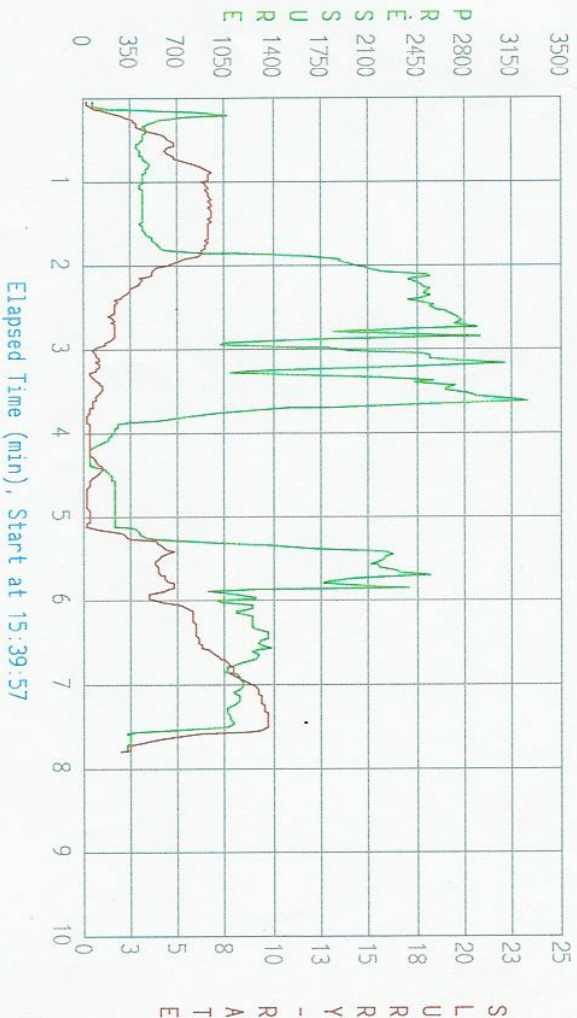
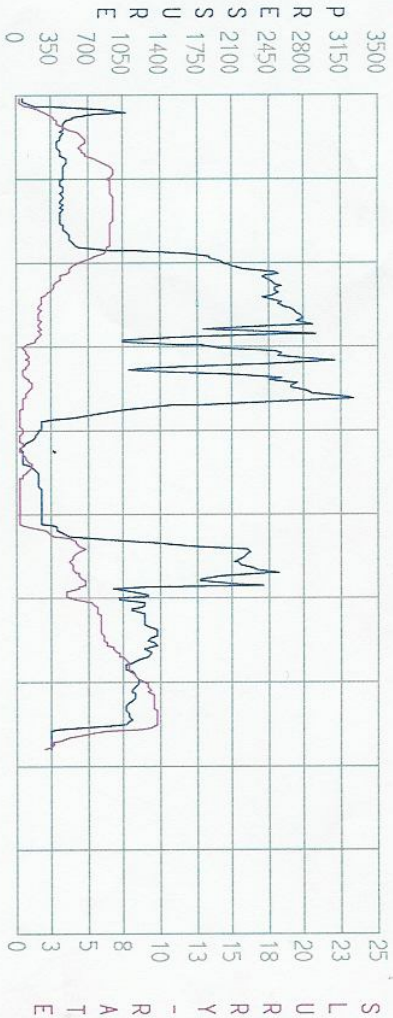
Tubing:

Casing: 2 7/8

Packer:

Filename: 10102203

Closure Pres: 4000



Elapsed Time (min), Start at 15:39:57