



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: _____



1055449

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 33865

Federal Tax I.D.# 20-5975804

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

SERVICE POINT: Russell

DATE <u>4-21-10</u>	SEC. <u>7</u>	TWP. <u>10</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>1:00 p.m.</u>	JOB FINISH <u>1:30 p.m.</u>
LEASE <u>Ouder Kirk</u>	WELL # <u>3</u>	LOCATION <u>Zurich 2w 2s 1/2w Sinto</u>			COUNTY <u>ROCKS</u>	STATE <u>KS</u>	

OLD OR NEW (Circle one)

CONTRACTOR Trinity

TYPE OF JOB Squeeze

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE 2 7/8 DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL Reinhardt's Rick DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT T: 56L C: 30L

EQUIPMENT

PUMP TRUCK CEMENTER Craig

398 HELPER Paul

BULK TRUCK

378 DRIVER Bob

BULK TRUCK

_____ DRIVER _____

OWNER _____

CEMENT

AMOUNT ORDERED 200 Corn

COMMON 200 @ 13.50 2700.00

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 100 @ 2.25 225.00

MILEAGE 110/5k/mile 500.00

TOTAL 3425.00

REMARKS:

Hole from 995-1028
For 1360 900PSI packer set to squeeze @
820. Mixed 200SK Com. & Displace.
Squeezed to 200 PSI. Wash around
Tool & Shut in.

Thanks!

CHARGE TO: HLB

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 1159.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 50 @ 7.00 350.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 1509.00

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____

TOTAL CHARGES ~~3425.00~~

DISCOUNT ~~_____~~

IF PAID IN 30 DAYS

PRINTED NAME Milly Hammerstein

ALLIED CEMENTING CO., LLC. 33914

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Russell KS

DATE <u>4-16-10</u>	SEC. <u>7</u>	TWP. <u>10</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>12:30pm</u>	JOB FINISH <u>1:00pm</u>
<u>Ouderkirk LEASE</u>	WELL # <u>3</u>	LOCATION <u>Zurich KS 2 West 2 South 1/2 West</u>			COUNTY <u>Rooks</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<u>South into</u>				

CONTRACTOR Trinity
 TYPE OF JOB Squeeze
 HOLE SIZE _____ T.D. _____
 CASING SIZE 5 1/2 DEPTH 8P@ 3650
 TUBING SIZE 2 7/8 DEPTH 870'
 DRILL PIPE _____ DEPTH _____
 TOOL Reinhardt Services DEPTH 870'
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT C=2.05 T=5.04

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts
 # 417 HELPER Shane
 BULK TRUCK
 # 410 DRIVER Ron
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Holes 995'-1028' Packer set @ 870'
Mix 25% sk neat followed by 175 sk
hot 3 1/2 cc. Displaced 5 1/2 Bbl and squeeze to 1500 psi.
Release pull SJTs pressure up to 500 psi and shut in.
Thank You!

CHARGE TO: H&B
 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 contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Mike Hammersmith

OWNER _____
 (used 200com and 6cc)
 CEMENT _____
 AMOUNT ORDERED 200com
7cc on side

COMMON	<u>200</u>	@	<u>13.50</u>	<u>2700.00</u>
POZMIX		@		
GEL		@		
CHLORIDE	<u>7</u>	@	<u>51.50</u>	<u>360.50</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>100</u>	@	<u>2.25</u>	<u>225.00</u>
MILEAGE	<u>110/sk/mi.</u>			<u>500.00</u>
TOTAL				<u>3785.50</u>

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>991.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>56</u>	@	<u>7.00</u>	<u>350.00</u>
MANIFOLD		@		
		@		
		@		
TOTAL				<u>1341.00</u>

PLUG & FLOAT EQUIPMENT

	@			
	@			
	@			
	@			
	@			
TOTAL				_____

SALES TAX (If Any) _____
 TOTAL CHARGES ~~3785.50~~
 DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC.

33908

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Russell KS

DATE <u>4-13-10</u>	SEC. <u>7</u>	TWP. <u>10</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>7:45pm</u>	JOB FINISH <u>8:30pm</u>
Ouder kirk LEASE		WELL # <u>3</u>	LOCATION <u>Zurich KS 2 West 2 South</u>			COUNTY <u>Rooks</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<u>1/2 West South into.</u>				

CONTRACTOR Trinity

TYPE OF JOB Squeeze

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH BP@ 3650'

TUBING SIZE 2 7/8 DEPTH 2530' / 870'

DRILL PIPE _____ DEPTH _____

TOOL Reihardt Services DEPTH 2530' / 870'

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT ~~7.16 bbl/c=3.86~~ C=9.37 Bbl/c=3.05 T=5.04

OWNER _____

(Used 150sk com 4skcc 2sk sand)

CEMENT AMOUNT ORDERED 150com

On side 5cc 2 sand

COMMON	<u>150</u>	@	<u>13.50</u>	<u>2025.00</u>
POZMIX		@		
GEL		@		
CHLORIDE	<u>4</u>	@	<u>54.50</u>	<u>206.00</u>
ASC		@		
<u>Sand</u>	<u>2</u>	@	<u>12.75</u>	<u>25.50</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>150</u>	@	<u>2.25</u>	<u>337.50</u>
MILEAGE	<u>110/sk/mile</u>			<u>675.00</u>
TOTAL				<u>3269.00</u>

EQUIPMENT

PUMP TRUCK # 417 CEMENTER John Roberts

BULK TRUCK # 410 HELPER Matt

BULK TRUCK # _____ DRIVER Ron

BULK TRUCK # _____ DRIVER _____

REMARKS:

BP@ 3650 test @ 1000psi Spot 2sk sand @ 3600'
Hole 2934-67 Spot 45sk cement neat @ 2967'
Pulled up to 2550 and washed around tool pulled
one jt. set tool 2530' Displace 2.5 Bbl squeezed
to 1000psi Released pressure dried up. Top Hole 995-1028'
Set packer @ 870' Mixed 100sk w/ 4skcc Displaced
6 1/4 Bbl and squeezed to 1000psi. Released pressure
dried up. Wash around tool pulled 5 jts pressured up
to 500psi and shut in!
Thank You!

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>1159.00</u>
EXTRA FOOTAGE	@		
MILEAGE	<u>45</u>	@	<u>7.00</u>
MANIFOLD	@		
	@		
	@		
TOTAL <u>1474.00</u>			

CHARGE TO: H & B

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL _____			

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____

TOTAL CHARGES [scribble]

DISCOUNT [scribble] IF PAID IN 30 DAYS

PRINTED NAME Mike Hammersmith

ALLIED CEMENTING CO., LLC. 041779

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell

DATE <u>6-23-10</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>6:30 p.m.</u>	JOB FINISH <u>7:00 p.m.</u>
LEASE <u>OLDEXIRK</u>	WELL # <u>3</u>		LOCATION <u>Zurich 2w 2s 1/2w Sinto</u>			COUNTY <u>Rock's</u>	STATE <u>Ks</u>
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR CO Tools
 TYPE OF JOB Liner
 HOLE SIZE 5 1/2 T.D.
 CASING SIZE 4 1/2 10 1/2 DEPTH 3723
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 59 1/4 Bbl

OWNER _____

CEMENT
 AMOUNT ORDERED 200 60/40 4 1/2 Gel
1/2 10 1/2 D-31
Liquid Determer

EQUIPMENT
 PUMP TRUCK CEMENTER Craig
 # 398 HELPER Paul
 BULK TRUCK
 # 378 DRIVER Ken
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>120</u>	@	<u>13.50</u>	<u>1620.00</u>
POZMIX	<u>80</u>	@	<u>7.55</u>	<u>604.00</u>
GEL	<u>7</u>	@	<u>20.25</u>	<u>141.75</u>
CHLORIDE		@		
ASC		@		
CP-31	<u>86</u>	@	<u>9.10</u>	<u>782.60</u>
		@		
		@		
		@		
		@		
HANDLING	<u>100</u>	@	<u>2.25</u>	<u>225.00</u>
MILEAGE	<u>110/5k/mile</u>			<u>500.00</u>
TOTAL				<u>3873.35</u>

REMARKS:

4 1/2 Liner set @ 3723 lead hole w/ salt water
Est. Circulation - Mix Cement + Displace plug w/ salt water
Cement circulated while mixing. Mixed 200sk
Clear line - Start D. 50lb cement plug lead w/ salt
Release pressure. Float held

Thanks

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>991.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>50</u>	@	<u>7100</u>
MANIFOLD		@	
		@	
		@	

CHARGE TO: HAB
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1341.00

PLUG & FLOAT EQUIPMENT

<u>4 1/2</u>			
<u>BW Float shoe</u>		@	<u>206.00</u>
<u>Rubber plug</u>		@	<u>27.00</u>
		@	
		@	
		@	

TOTAL 233.00

To Allied Cementing Co., LLC.
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SALES TAX (If Any) _____

TOTAL CHARGES _____