



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

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: _____



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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

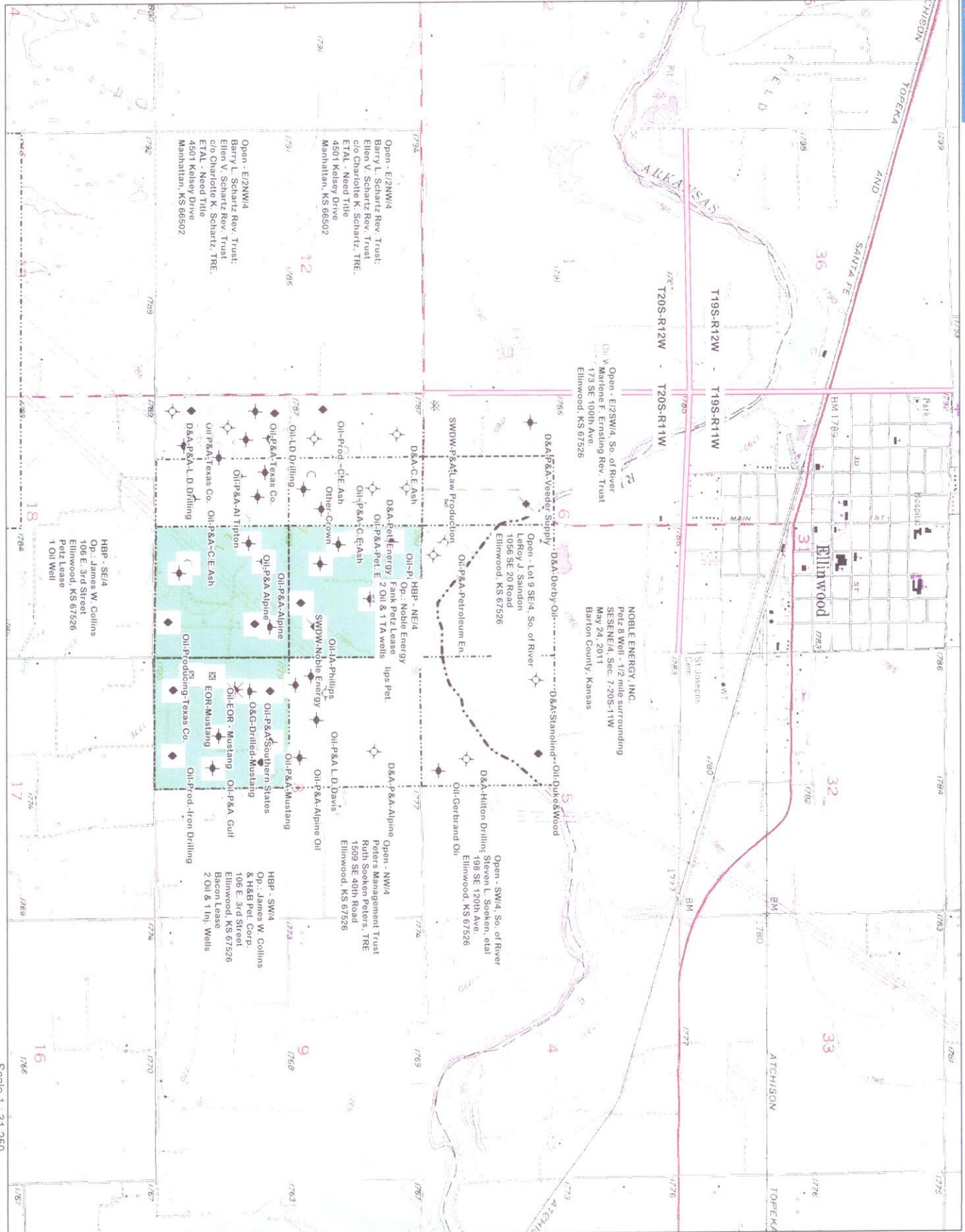
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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 Bbbs.	Gas Mcf	Water Bbbs.	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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Data use subject to license

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www.delorme.com



Scale 1 : 31 250
 1" = 2,604.2 ft
 Data Zoom 12-6



LASERLOG™

GEARHART

COMPUTED FROM
DIRECT DIGITAL WELL LOGS

Program WELLSITE EVALUATION LOG

Using the following logs: DIL, CDL, CNS, GR, Caliper

FIELD
PRINT

COMPANY PHILLIPS PETROLEUM COMPANY
 WELL PETZ # 8
 FIELD CHASE - SILICA
 COUNTY BARTON STATE KANSAS
 DATE 12-20-85 NUMBER 341300
 LOCATION 50' N of SE SE NE
 3020' ESL & 330' FEL
 7 - 205 - 11W
 ELEV. KB 1784 DF - GL 1779

Laserlog presentations are computed using
Direct Digital Well Log data.

NOTICE: Gearhart Industries, Inc. cannot and does not guarantee the accuracy or correctness of any log data or of any interpretation thereof and shall not be liable or responsible for any loss, cost, damage or expense incurred or sustained by Customer resulting from any log data or interpretation made by Gearhart Industries, Inc. or any of its agents, servants or employees. Neither log data nor interpretation thereof should be relied upon as the sole basis for any drilling, completion, well treatment or production decision or any other procedure. Unless there is presently in effect a master or other specific or general contract intended to extend and apply hereto, this Log is provided in accordance with Gearhart Industries, Inc.'s General Terms and Conditions as set out in its current price schedule.

GEARHART INDUSTRIES, INC.

Engineer DURANY Truck 7228 Location G.B. Job 341300
 Witnessed by MR. K. SNOW & MR. P. PARKER
 Elevation KB 1784 DF - GL 1779
 Mud Measurements Rm = 0.47 @ 66 °F, Rmf = 0.35 @ 66 °F, Rmc = 0.60 @ 66 °F, BHT = 0.30 @ 107 °F

Remarks:

COMPUTATION PARAMETERS

SEISMIC COPY™ FILM
LOG HEADERS

STOP	START	TD	BIT	T-SUR	BHT	A	M
N	RW	T-RW	RMF	T-RMF	MER	R2 LIM	MATRIX
P MA	P FL	ΔT MA	ΔT FL	CP	φ-MAX	CAL MAX	ΔP MAX
P COAL	φ COAL	ΔT COAL	P SH	φN SH	ΔT SH	GR CL	GR SH

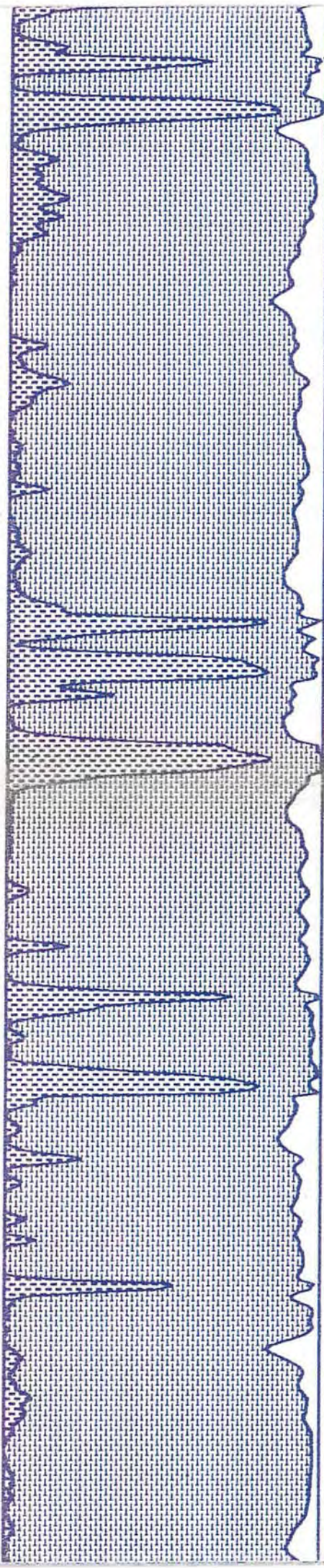
FORM N2128H R 11/82

	SP CL	SP SH	ØN CL	RT MAX	RT SH	RXO SH	VSH INT	
VSH LIST	Ø LIST	VSH AV	Ø AV	VSH CAL	P GRAD		SW LIM	
P SALT	ØN SALT	BO	X	RELSEL	VSH SEL	TOOL SELECTION		
1	2598	3056	3438	7.88	70	107	1.000	2.000
	2.00	0.060	100	0.350	66	1.3	40.00	2
	2.710	1.000	*	*	*	35.00	2.00	0.200
	1.700	50.00	*	2.500	26.00	*	30.0	115.0
	0.0	0.0	2.00	500.0	3.5	4.5	0	*
	90	2.00	65	6.00	80	0.450	*	50.00
	2.030	1.00	1.25	0.20		13	123	0
2	3056	3292	3438	7.88	70	107	1.000	2.000
	2.00	0.050	100	0.350	66	1.3	40.00	2
	2.710	1.000	*	*	*	35.00	2.00	0.200
	1.700	50.00	*	2.500	26.00	*	25.0	105.0
	0.0	0.0	2.00	500.0	3.5	4.5	0	*
	90	2.00	65	6.00	80	0.450	*	50.00
	2.030	1.00	1.25	0.20		13	123	0
3	3292	3420	3438	7.88	70	107	1.000	2.000
	2.00	0.180	100	0.350	66	1.3	40.00	2
	2.870	1.000	*	*	*	35.00	2.00	0.200
	1.700	50.00	*	2.500	26.00	*	15.0	120.0
	0.0	0.0	2.00	500.0	3.5	4.5	0	*
	90	2.00	65	6.00	80	0.450	*	50.00
	2.030	1.00	1.25	0.20		13	123	0

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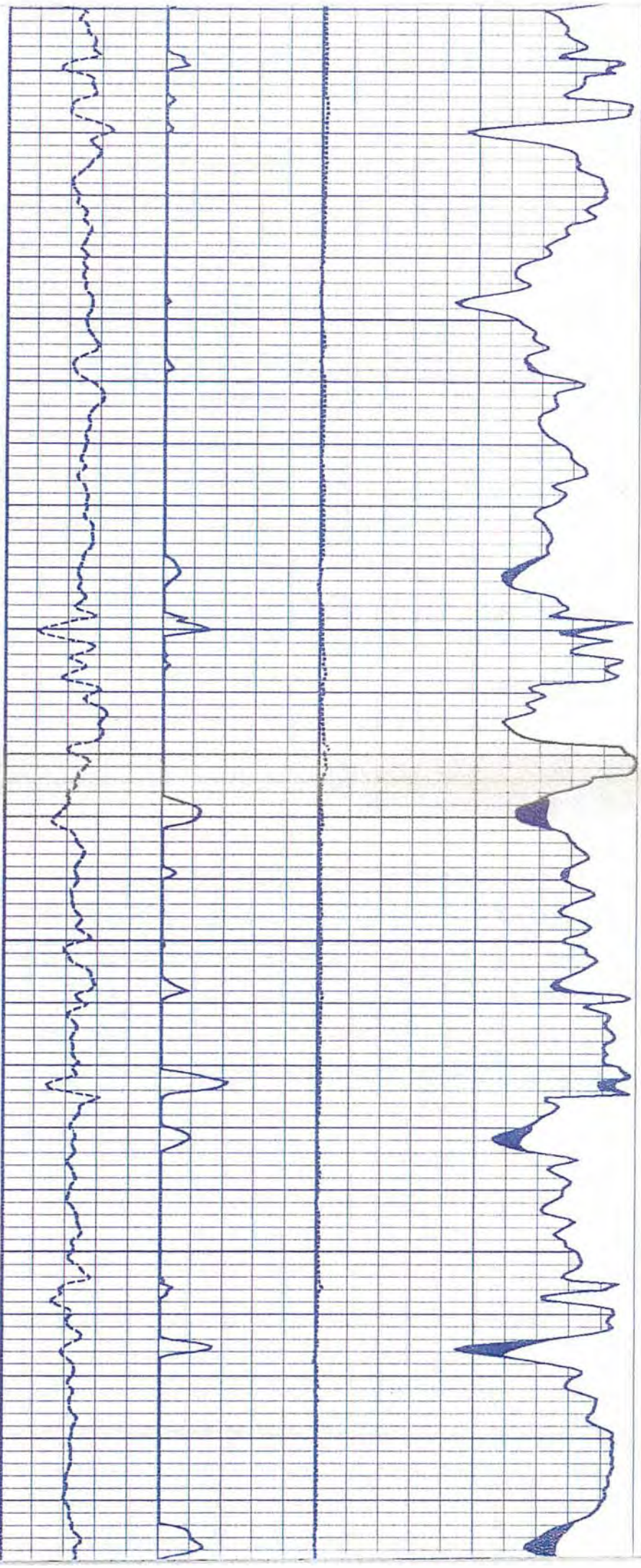
100	Ø	0	2.5PMA3.00				
0	VSH	100	-----	100%SW	0	30	Ø
							Ø*SW

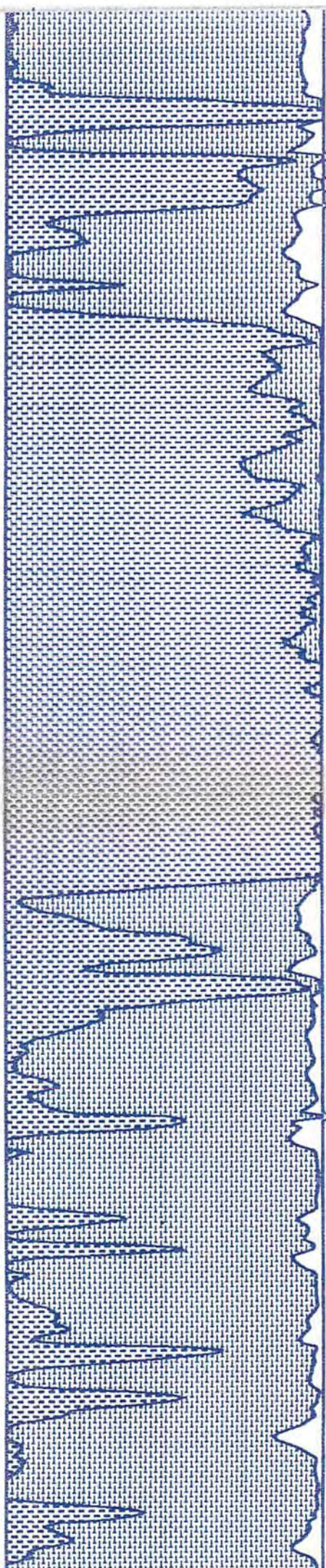




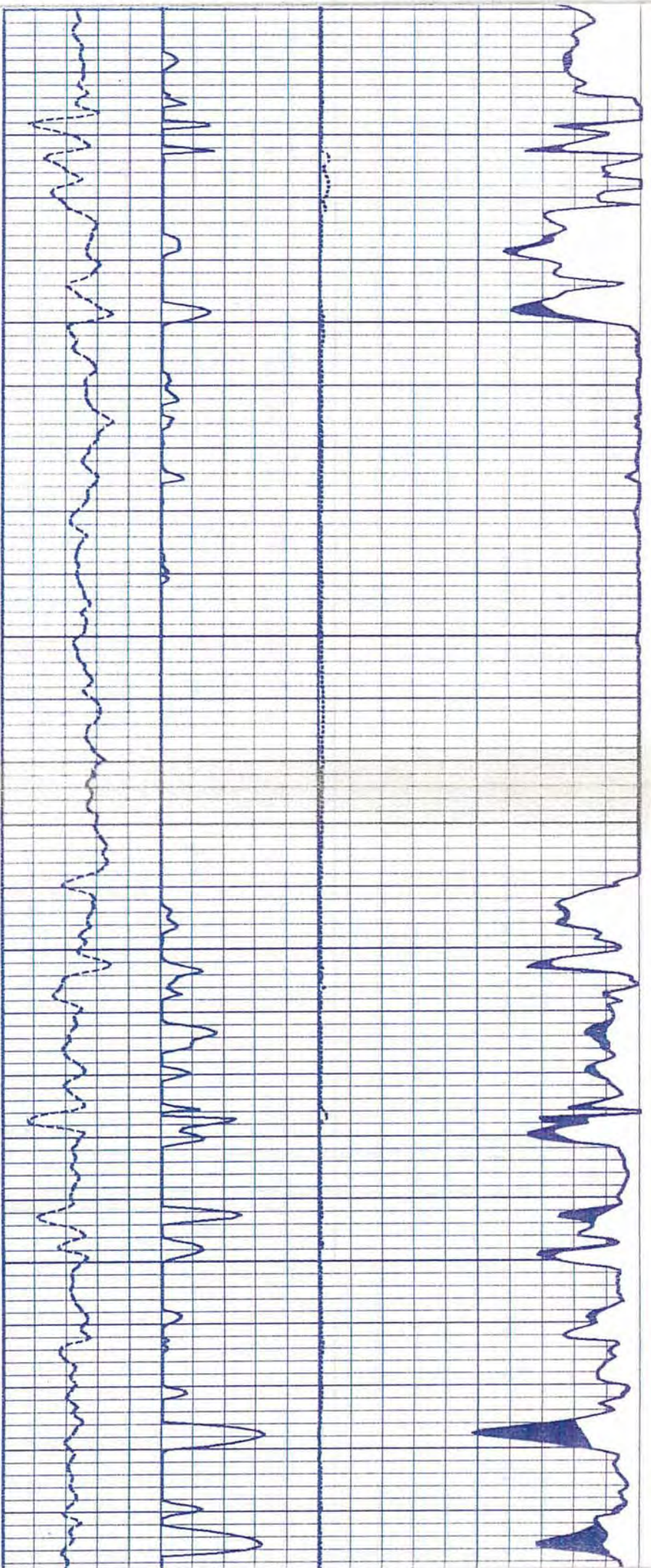
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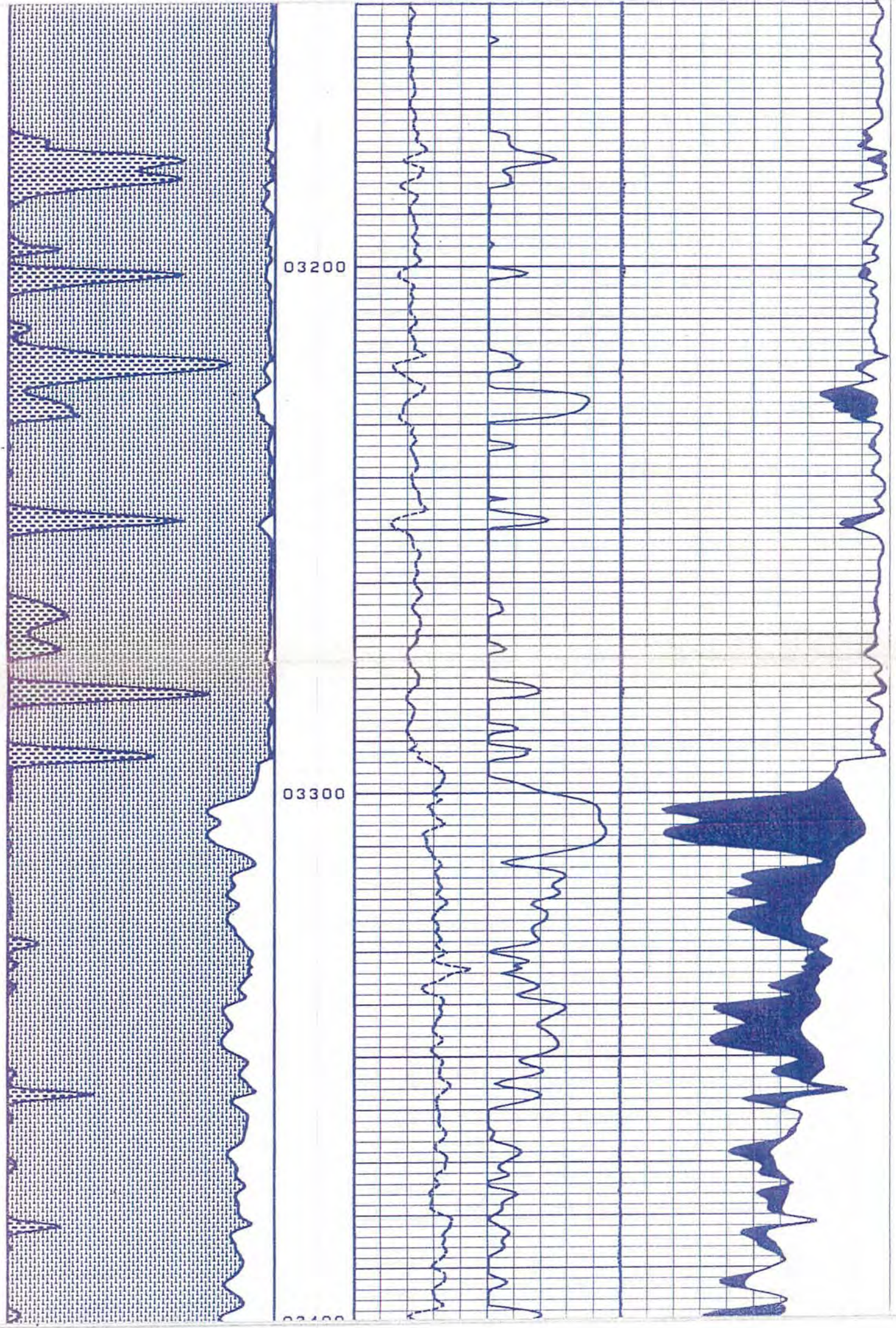
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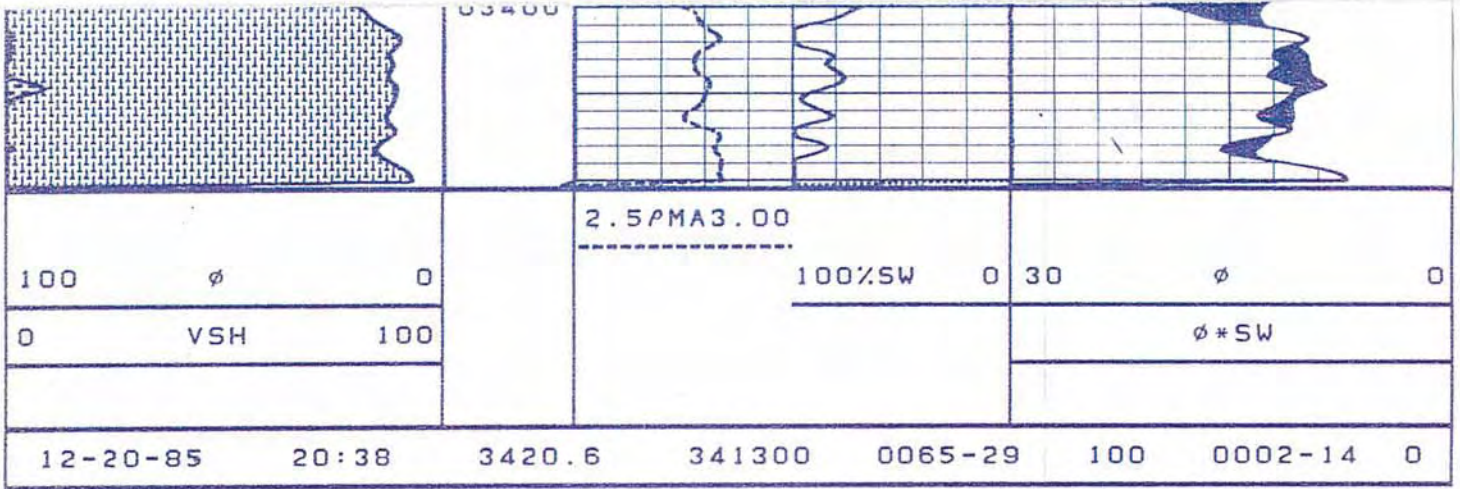


03200

03300

03400





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Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



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Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

June 23, 2011

Liz Lindow
Noble Energy, Inc.
1625 Broadway, Ste 2200
DENVER, CO 80202

Re: ACO1
API 15-009-24121-00-00
PETZ 8
NE/4 Sec.07-20S-11W
Barton County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Liz Lindow