



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: _____



1058825

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 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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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DRILL STEM TEST REPORT

Prepared For: **Rama Operating CO Inc**

101 S Main ST Stafford KS
67578+1429

ATTN: Josh Austin

5-20-11 Barton

Grant #8-5

Start Date: 2011.06.22 @ 14:10:00

End Date: 2011.06.22 @ 20:24:30

Job Ticket #: 15822 DST #: 1

Superior Testers Enterprises LLC
PO Box 138 Great Bend KS 67530
1-800-792-6902

Printed: 2011.06.22 @ 20:49:06



DRILL STEM TEST REPORT

TOOL DIAGRAM

Rama Operating CO Inc
 101 S Main ST Stafford KS
 67578+1429
 ATTN: Josh Austin

Grant #8-5
5-20-11 Barton
 Job Ticket: 15822 **DST#: 1**
 Test Start: 2011.06.22 @ 14:10:00

Tool Information

Drill Pipe:	Length: 2875.00 ft	Diameter: 3.80 inches	Volume: 40.33 bbl	Tool Weight:	1000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer:	20000.00 lb
Drill Collar:	Length: 240.00 ft	Diameter: 2.25 inches	Volume: 1.18 bbl	Weight to Pull Loose:	90000.00 lb
			<u>Total Volume: 41.51 bbl</u>	Tool Chased	8.00 ft
Drill Pipe Above KB:	4.00 ft			String Weight: Initial	64000.00 lb
Depth to Top Packer:	3131.00 ft			Final	64000.00 lb
Depth to Bottom Packer:	ft				
Interval between Packers:	14.00 ft				
Tool Length:	34.00 ft				
Number of Packers:	2	Diameter: 6.75 inches			

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
SHut-InTool	5.00		Inside	3116.00	
Hydraulic Tool	5.00			3121.00	
Packer	5.00			3126.00	20.00 Bottom Of Top Packer
Packer	5.00			3131.00	
Anchor	9.00			3140.00	
Recorder	1.00	8525	Inside	3141.00	
Recorder	1.00	8524	Outside	3142.00	
Bullnose	3.00			3145.00	14.00 Bottom Packers & Anchor

Total Tool Length: 34.00



DRILL STEM TEST REPORT

FLUID SUMMARY

Rama Operating CO Inc

Grant #8-5

101 S Main ST Stafford KS
67578+1429

5-20-11 Barton

Job Ticket: 15822

DST#: 1

ATTN: Josh Austin

Test Start: 2011.06.22 @ 14:10:00

Mud and Cushion Information

Mud Type: Gel Chem
Mud Weight: 9.00 lb/gal
Viscosity: 55.00 sec/qt
Water Loss: 8.79 in³
Resistivity: 3.00 ohm.m
Salinity: 1200.00 ppm
Filter Cake: 1.00 inches

Cushion Type:
Cushion Length: ft
Cushion Volume: bbl
Gas Cushion Type:
Gas Cushion Pressure: psia

Oil API: deg API
Water Salinity: ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
60.00	Slightley Oil Gas cut muddy w ater 2	0.295
0.00	20%oil 20%mud 20%w ater 40%gas	0.000
0.00	120 Fett Gas in Pipe 100% Gas	0.000
0.00	Chlorides 30,000	0.000
0.00	resistivity 3 @ 81 degrees	0.000

Total Length: 60.00 ft Total Volume: 0.295 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments:

Serial #: 8525

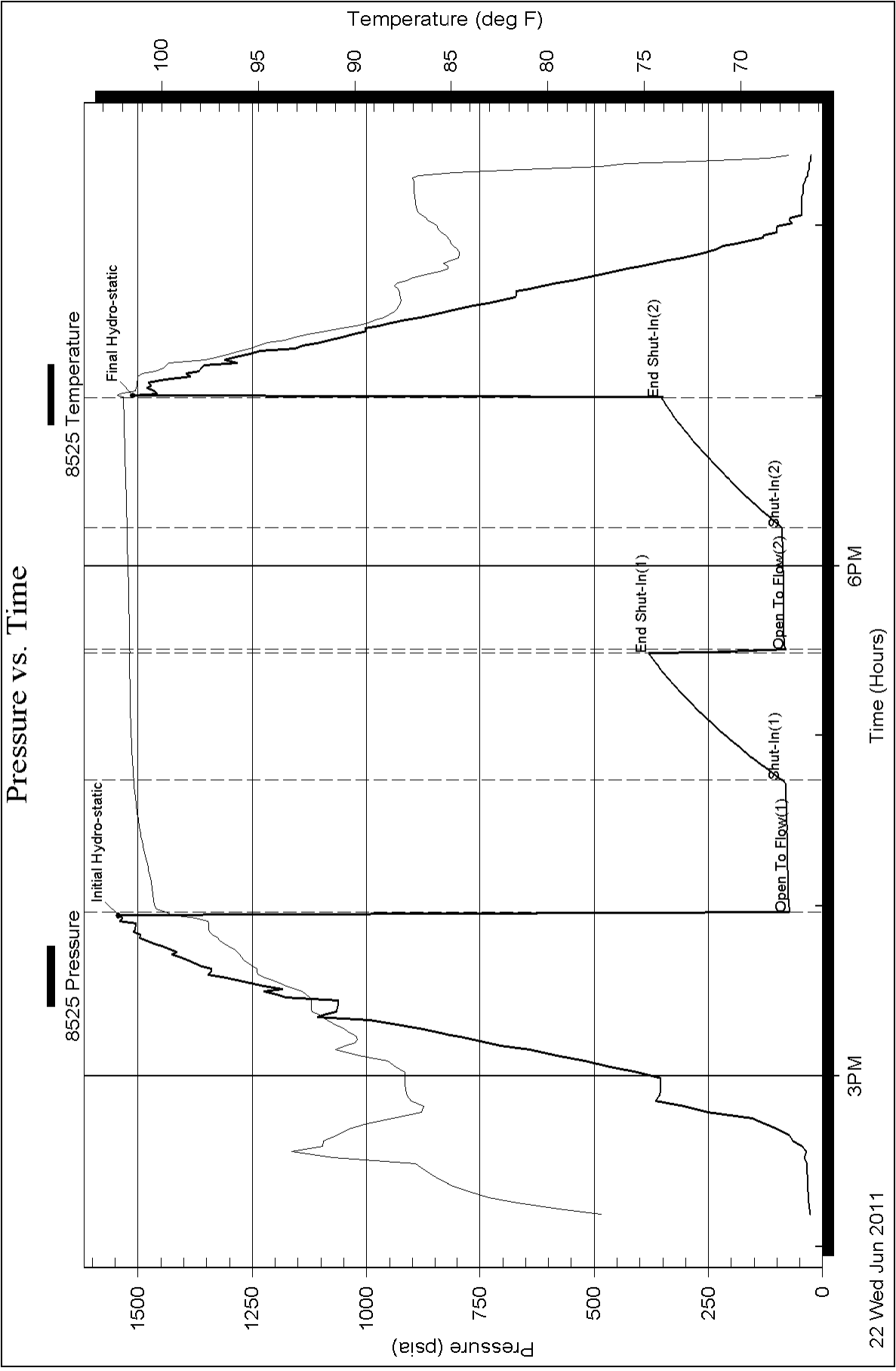
Inside

Rama Operating CO Inc

5-20-11 Barton

DST Test Number: 1

Pressure vs. Time



22 Wed Jun 2011

Time (Hours)

6PM

3PM

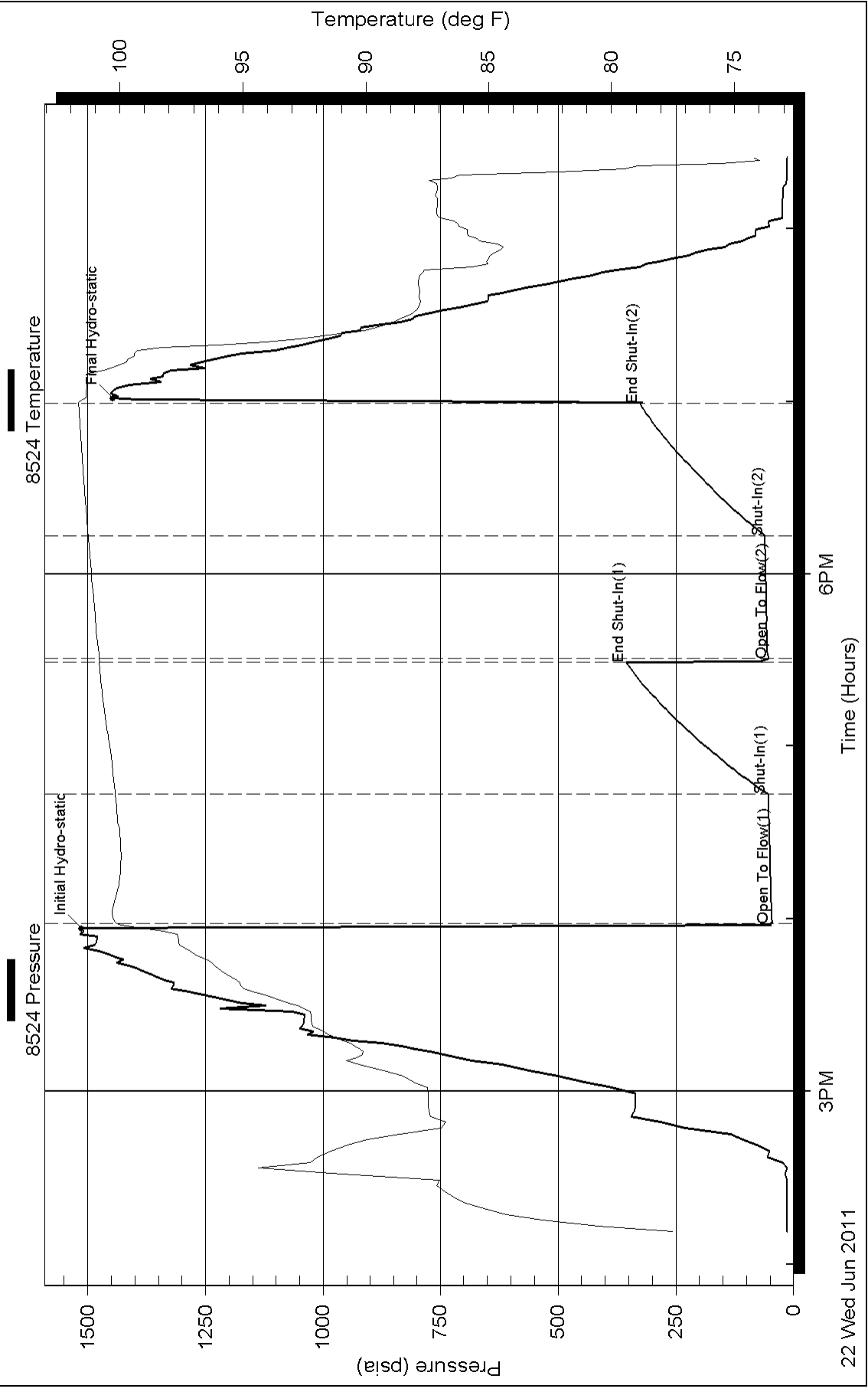
Serial #: 8524

Outside Rama Operating CO Inc

5-20-11 Barton

DST Test Number: 1

Pressure vs. Time



Customer Nama Operating Company, Inc.		Lease No. Well # 8-5		Date 6-19-11	
Lease Grant		Field Order # 4,363		Station Pratt, Kansas	
Type Job C.N.W. - Surface		Casing 8 5/8 28Lb		Depth 308 Feet	
		County Barton		State Kansas	
		Formation		Legal Description 5-205-11W	

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft	From	To	Rate	Press	ISIP	
8 5/8 28Lb/ft	8 5/8 28Lb/ft	350 sacks	28 Feet	308 Feet	60/40 Poz with			5 Min.
Depth	Depth		From	To	38 Calcium Chloride	.25Lb/sk	cell flake	
Volume	Volume		From	To	14.8Lb./Gal.	5.18Gal/sk	1.2 CU.FT./SK.	
Max Press	Max Press		From	To			Avg	
300 P.S.I.							15 Min.	
Well Connection	Annulus Vol.		From	To			HHP Used	
Ug Con	100 gal						Annulus Pressure	
Plug Depth	Packer Depth		From	To	Flush	18 Bbl. Fresh Water	Gas Volume	
213 Feet							Total Load	

Customer Representative Lanny Saloga	Station Manager David Scott	Treater Clarence R. Messick
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Service Units	37,216	19,903	19,905	19,960	19,918
Driver Names	Messick	Mattal	Phye		

Time P.M.	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
8:15					Trucks on location and hold safety meeting.
10:00	Sterling			11	Joints used - tested 28Lb/ft. 8 5/8 casing.
11:05					Casing in well. Circulate for 5 minutes.
11:12	300			5	Start Fresh Water Pre-flush.
	300		10	5	Start Mixing 350 sacks 60/40 Poz cement.
	-0-		85		Stop pumping. Shut in well. Release wooden plug. Open Well.
11:38	100			5	Start Fresh Water Displacement.
11:45	300		18		Plug down. Shut in well.
					Circulated 5 sacks cement to the pit.
					Wash up pump truck.
					Job Complete.
					Thank You.
					Clarence, Mike, Dale