





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  Yes  No  
(Attach Additional Sheets)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No

Electric Log Submitted Electronically  Yes  No  
(If no, Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum  Sample  
Name Top Datum

CASING RECORD  New  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				

PERFORATION RECORD - Bridge Plugs Set/Type  
Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record  
(Amount and Kind of Material Used)

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

Vented  Sold  Used on Lease  
(If vented, Submit ACO-18.)

METHOD OF COMPLETION:

Open Hole  Perf.  Dually Comp.  Commingled  
(Submit ACO-5) (Submit ACO-4)  
 Other (Specify) \_\_\_\_\_

PRODUCTION INTERVAL:

\_\_\_\_\_  
 \_\_\_\_\_

## Summary of Changes

Lease Name and Number: Crown 14

API/Permit #: 15-059-25672-00-00

Doc ID: 1060960

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved Date	07/21/2011	08/10/2011
Producing Formation	bartlesville	squirrel
Save Link	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1059892">../..kcc/detail/operatorEditDetail.cfm?docID=1059892</a>	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1060960">../..kcc/detail/operatorEditDetail.cfm?docID=1060960</a>