



**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: \_\_\_\_\_



1061927

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
---	---

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
-----------------------------------	-----------	---------	-------------	---------------	---------

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
---	--	--



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 236342

Invoice Date: 08/31/2010 Terms:

Page 1

W.D. SHORT OIL CO LLC  
P.O. BOX 729  
OXFORD KS 67115  
(620)455-3576

CARSON #9  
29098  
08-31-10

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	250.00	13.5000	3375.00
1102	CALCIUM CHLORIDE (50#)	700.00	.7500	525.00
1118B	PREMIUM GEL / BENTONITE	470.00	.2000	94.00
1107	FLO-SEAL (25#)	62.00	2.1000	130.20

  

Description	Hours	Unit Price	Total
445 CEMENT PUMP (SURFACE)	1.00	725.00	725.00
445 EQUIPMENT MILEAGE (ONE WAY)	60.00	3.65	219.00
515 TON MILEAGE DELIVERY	705.00	1.20	846.00

Parts:	4124.20	Freight:	.00	Tax:	280.44	AR	6194.64
Labor:	.00	Misc:	.00	Total:	6194.64		
Sublt:	.00	Supplies:	.00	Change:	.00		

*OK-DON  
CARSON #9 (New Well Exp)*

Signed \_\_\_\_\_

Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 29098  
LOCATION Earlka  
FOREMAN Kevin McCoy

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
8-31-10	7876	CATSON # 9	19	325	3E	Cowley	
CUSTOMER W.D. Short Oil Co., LLC			Gulick Delg. Co.	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 729				445	Justin		
CITY OXFORD				515	CHRIS		
STATE KS							
ZIP CODE 67119							

JOB TYPE SURFACE 0 HOLE SIZE 12 1/4 HOLE DEPTH 315' CASING SIZE & WEIGHT 8 5/8 23" new  
 CASING DEPTH 314' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 15.2 \* SLURRY VOL 60 BBL WATER gal/sk 6.5 CEMENT LEFT in CASING 20'  
 DISPLACEMENT 18.5 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 8 5/8 casing. Break circulation w/ 10 BBL fresh water. Mixed 250 sks Class 'A' cement w/ 3% CaCl2, 2% Gel, 1/4" floccle 1sk @ 15.2\*/gal, yield 1.35. Displace w/ 18.5 BBL fresh water. Shut casing in. Good cement returns to surface = 12 BBL slurry to pit. Job complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5406	60	MILEAGE	3.65	219.00
11045	250 sks	CLASS 'A' Cement	13.50	3375.00
1102	700 *	CaCl2 3%	.75	525.00
1118 B	470 *	Gel 2%	.20	94.00
1107	62 *	floccle 1/4" /sk	2.10	130.20
5407 A	11.75 Tons	60 miles Bulk Delv.	1.20	846.00
			Sub Total	5914.20
		6.8 %	SALES TAX	280.44
			ESTIMATED TOTAL	6194.64

Ravin 3737

236342

AUTHORIZATION Witnessed By Ron Gulick TITLE Contractor/Gulick Delg. DATE 8-31-10

I acknowledge that the payment terms, unless specifically amended in writing on the front of the 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.



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 236488

Invoice Date: 09/13/2010 Terms:

Page 1

W.D. SHORT OIL CO LLC  
P.O. BOX 729  
OXFORD KS 67115  
(620)455-3576

CARSON #9  
29118  
09-04-10

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	140.00	17.0000	2380.00
1110A	KOL SEAL (50# BAG)	700.00	.4200	294.00
1124	50/50 POZ CEMENT MIX	275.00	9.8400	2706.00
1118B	PREMIUM GEL / BENTONITE	1400.00	.2000	280.00
1107A	PHENOSEAL (M) 40# BAG)	140.00	1.1500	161.00
1123	CITY WATER	6000.00	.0149	89.40
4159	FLOAT SHOE AFU 5 1/2"	1.00	328.0000	328.00
4130	CENTRALIZER 5 1/2"	6.00	46.0000	276.00
4104	CEMENT BASKET 5 1/2"	2.00	219.0000	438.00
4277	DV TOOL SIZE 5 1/2" (STA	1.00	3045.0000	3045.00

  

Description	Hours	Unit Price	Total
T-63 WATER TRANSPORT (CEMENT)	5.00	112.00	560.00
445 CEMENT PUMP	1.00	925.00	925.00
445 EQUIPMENT MILEAGE (ONE WAY)	60.00	3.65	219.00
445 CEMENT PUMP	1.00	925.00	925.00
515 TON MILEAGE DELIVERY	577.50	1.20	693.00
543 TON MILEAGE DELIVERY	577.50	1.20	693.00

Parts: 9997.40 Freight: .00 Tax: 679.82 AR 14692.22  
 Labor: .00 Misc: .00 Total: 14692.22  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 29118

LOCATION EUREKA

FOREMAN Kevin McCoy

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-4-10	7876	CARSON #9	19	325	3E	Cowley
CUSTOMER W.D. SHORT OIL Co. LLC			Gulick DR19.			
MAILING ADDRESS P.O. Box 729						
CITY OXford	STATE Ks	ZIP CODE 67119				
TRUCK #						
			445	Justin		
			515	CHRIS		
			543	John G.		
			452 763	Jim		

JOB TYPE Longstring O HOLE SIZE 7 7/8 HOLE DEPTH 2820' K.B. CASING SIZE & WEIGHT 5 1/2 15.50"  
 CASING DEPTH 2812' G.L. DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 12.7-13.7 SLURRY VOL 44 BBL, 80 BBL WATER gal/sk 9.0 CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 67.7-43.5 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Stage #1 5 1/2 set @ 2812' G.L. Stage Collar set @ 1808' below G.L. Break  
Circulation w/ 15 BBL water. Mixed 140 sks Thick Set Cement w/ 5\* KoL-Seal/sk @ 13.7\*/gal. Shut down.  
wash out Pump & Lines. Release Flex Plug. Displace w/ 67.7 BBL water. Final Pumping Pressure 750 PSI. Bump  
Plug to 1250 PSI. Release Pressure, Float & Plug held. Drop Trip Bomb, Open Stage Collar @ 1100 PSI. Circulate  
w/ mud Pump for 3 Hrs. ~ 8 BBL Cement Slurry to Pit. Stage #1 Complete.  
Stage #2 Pump 10 BBL water ahead. Mixed 275 sks 50/50 Pozmix Cement w/ 6% Gel, 1/2\* Pheno  
Seal/sk @ 12.7\*/gal. Shut down. wash out Pump & Lines. Release Closing Plug. Displace w/ 43.5 BBL  
water. Final Pumping Pressure 700 PSI. Close Stage Collar @ 1100 PSI. Bump Plug to 1400 PSI.  
Release Pressure. No Flow BACK, Stage Collar Closed. 1 BBL Cement Slurry to Pit. Job Complete.  
Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Stage #1	925.00	925.00
5406	60	MILEAGE	3.65	219.00
1126 A	140 sks	Thick Set Cement } Stage #1	17.00	2380.00
1110 A	700*	KoL-Seal 5*/sk } Stage #1	.42	294.00
5401	1	Pump Charge Stage #2	925.00	925.00
1124	275 sks	50/50 Pozmix Cement } Stage #2	9.84	2706.00
1118 B	1400*	Gel 6% } Stage #2	.20	280.00
1107 A	140*	Pheno Seal 1/2*/sk } Stage #2	1.15	161.00
5407 A	19.25 Tons	60 miles Bulk Delv.	1.20	1386.00
5501 C	5 Hrs	WATER TRANSPORT	112.00	560.00
1123	6000 gals	City water	14.90/1000	89.40
4159	1	5 1/2 AFU Float Shoe	328.00	328.00
4130	6	5 1/2 x 7 7/8 Centralizers	46.00	276.00
4104	2	5 1/2 Cement Baskets	219.00	438.00
4277	1	5 1/2 DV Tool (Stage Collar) w/ Plugs	3045.00	3045.00
			Sub Total	14,012.40
		THANK You	SALES TAX 6.8%	679.82
			ESTIMATED TOTAL	14,692.22

Revin 3737

AUTHORIZATION Witnessed By Ron Gulick TITLE Contractor DATE 9-4-10

I acknowledge that the payment terms, unless specifically amended in writing on the front of the 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.