



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: \_\_\_\_\_



1064909

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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Form	ACO1 - Well Completion
Operator	Dixon Energy, Inc.
Well Name	Scheer 2
Doc ID	1064909

All Electric Logs Run

Dual Induction Log
Dual Bond Log
Micro Log
Dual Compensated Log

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



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

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

Sam Brownback, Governor

January 27, 2012

Mike Dixon  
Dixon Energy, Inc.  
8100 E 22ND N BLDG 300, Ste 200  
WICHITA, KS 67226

Re: ACO1  
API 15-095-22224-00-00  
Scheer 2  
SE/4 Sec.31-29S-06W  
Kingman 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,  
Mike Dixon

Conservation Division  
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

January 30, 2012

Mike Dixon  
Dixon Energy, Inc.  
8100 E 22ND N BLDG 300, Ste 200  
WICHITA, KS 67226

Re: ACO-1  
API 15-095-22224-00-00  
Scheer 2  
SE/4 Sec.31-29S-06W  
Kingman County, Kansas

Dear Mike Dixon:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 07/16/2011 and the ACO-1 was received on January 27, 2012 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department



DST #1

4103-4118. SHT @ 4118' = 1°.

DST #1 4103-4118. 30-60-60-90, IF Strg. Blow. FF Strg blow. Rec. 2325' GIP, 50' OCWM  
(4%O, 19%W, 77%M). IHP 2130#, IFP 20-25#, ISIP 732# FFP 25-33#, FSIP 590#, FHP 1967#,  
TEMP 130°. Chlorides 19,000ppm (Mud 4500ppm) .

Customer <b>DIXON ENERGY, INC.</b>	Lease No.	Date <b>7-17-2011</b>
Lease <b>SCHEER</b>	Well # <b>2</b>	<b>TDJ</b>
Field Order # <b>4621</b>	Station <b>PRATT, KS.</b>	Casing <b>8 5/8"</b> Depth <b>230'</b>
Type Job <b>CO/W - SURFACE</b>	Formation	County <b>KINGMAN</b> State <b>Ks.</b>
		Legal Description <b>31-29-6</b>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <b>8 5/8"</b>	Tubing Size	Shots/Ft	<b>CMT-</b>	Acid <b>185SK 60/40POZ</b>	RATE	PRESS	ISIP	
Depth <b>213.11'</b>	Depth	From	To	Pre Pad <b>@ 1.21 CUFT<sup>3</sup></b>	Max		5 Min.	
Volume <b>13.63 BBL</b>	Volume	From	To	Pad	Min		10 Min.	
Max Press <b>300</b>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <b>P.C.</b>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <b>208'</b>	Packer Depth	From	To	Flush <b>13 BBL</b>	Gas Volume		Total Load	

Customer Representative <b>RICK - VAL #2</b>	Station Manager <b>D. SCOTT</b>	Treater <b>K. LESLEY</b>
Service Units <b>37283 19903 19905 19960 19918</b>		
Driver Names <b>LESLEY MITCHELL - LAWRENCE -</b>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
9:30 AM					ON LOCATION - SAFETY MEETING
10:30 AM					RUN 8 5/8" x 23# = 5 JTS.
11:40 AM					CSG. ON BOTTOM
11:41 AM					HOOK UP TO CSG. / BREAK CIRC. W/ RIG
12:00 PM	300		5	5	H2O AHEAD
12:08 PM	300		40	5	MIX 185SKS. 60/40POZ @ 14.8 PPG
12:10 PM					SHUT DOWN - DROP WOOD PLUG
12:12 PM	0		17	4	START DISPLACEMENT
12:20 PM	300		13	3	PLUG DOWN - CLOSE MANIFOLD
					CIRCULATION THRU JOBS
					CIRCULATED 10 BBL TO PIT
					JOB COMPLETE,
					THANKS -
					KEEVAN LESLEY



Customer Dixon Energy, Incorporated	Lease No. Well # 2	Date 7-26-11
Lease Scheer		
Field Order # 4387	Station Pratt, Kansas	Casing' Depth 5 1/2 15.5 Lb 4,240 Feet
Type Job C.N.W. - Longstring	Formation	County Kingman
		State Kansas
		Legal Description 31-295-6W

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 1/2 15.5 Lb./ft.	Tubing Size 4.240 Feet	Shots/Ft. 25 sacks	25 sacks AA2	60/40 Poz for	scavenger	RATE 322.38	PRESS Friction Reducer.	ISIP 758 Gas Bbl
Depth 4,240 Feet	Depth 100.9 Bbl.	From 125	To 108	5% FLA	5 Lb./sk. Gils	Min. nite		5 Min. 10 Min.
Volume 100.9 Bbl.	Volume 15.3 Lb.	From 5	To 60/40	Poz to plug	Rat (30 sacks)	Avg 1.36 CU. FT./sk.		15 Min.
Max Press	Max Press	From 50	To 60/40	Flush	100 Bbl. Fresh	HHP Used and Mouse	(20 sacks)	Annulus Pressure Holes
Well Connection 1 1/2" Cont.ainer	Annulus Vol. Packer Depth 4,200 Feet	From 50	To 60/40	Flush	100 Bbl. Fresh	Water		Total Load

Customer Representative Herb Durant	Station Manager David Scott	Treater Clarence R. Messich
Service Units 37,216	19,889	19,842
Driver Names Messich	Mitchel	McCastrey
19,832	21,010	

Time A.M.	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
5:00					Trucks on location and hold safety meeting.
9:45					Val Drilling start to run Regular Guide Shoe. Shoe Joint with Auto Fill Insert screwed into collar and a total of 108 Joints new 15.5 Lb./Ft. 5 1/2" casing. A Turbdrizer was installed on collars # 1, 2, 4, 7, 9, 11, 13 and # 15.
1:30					Casing in well. Rotate and Circulate for 1 1/2 hours.
	3300				Shut in well. Pressure Test. Open Well.
3:07	400			6.5	Start Fresh Water Pre-Flush.
	450		20	6	Start mud Flush.
	450		32	6	Start Fresh Water spacer.
3:19	500		52	5	Start mixing 25 sacks 60/40 Poz cement.
			57	5	start mixing 125 sacks AA2 cement.
	-0-		87		Stop pumping. Shut in well. Wash pump and lines
					Release Top Rubber Plug. Open Well.
3:27	100			6.5	Start Fresh Water Displacement.
			70	5	Start to lift cement.
3:43	800		100		Plug down.
	1,600				Pressure up.
					Release pressure. Insert held.
			7-5	3	Plug Rat and Mouse holes.
					Wash up pump truck.
4:30					Job Complete.
					Thank You.