



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: _____



1064975

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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CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 30220

LOCATION Eureka 123

FOREMAN Rick Ledford

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	
2-4-11	16605	Lehmann # 11.5				Coffey	
CUSTOMER		SAFETY MARKING					
Mailing Address		JS CH					
CITY		STATE	ZIP CODE				
Iola		KS	66749				
QUEST Development		RM					
P.O. Box 413				TRUCK #	DRIVER	TRUCK #	DRIVER
				445	John		
				479	Calin		
				78	Rudy (McKay TXO)		

JOB TYPE longstring 0 HOLE SIZE 5 7/8" HOLE DEPTH 1027' CASING SIZE & WEIGHT _____
 CASING DEPTH 1013' DRILL PIPE _____ TUBING 2 7/8" OTHER _____
 SLURRY WEIGHT 14" SLURRY VOL 35 bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 5' bbl DISPLACEMENT PSI 500 ~~1000~~ PSI 1000 Bump plugs RATE _____

REMARKS: Safety marking. Rig up to 2 7/8" tubing. Break circulation w/ 5 bbl fresh water. Pump 6 sks gel-flush, 15 bbl fresh water spacer. Mixed 135 sks OWC cement w/ 1/2" phenaseal/sk @ 14" / gal. shut down, washout pump + lines, drop 2 plugs. Displace w/ 5' bbl fresh water. Final pump pressure 500 PSI. Bump plugs to 1000 PSI. release pressure, float + plug held. Good cement returns to surface 5 bbl slurry to pit. Job complete. Rig down. Closed well in @ 0 PSI.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	40	MILEAGE	3.65	146.00
1126	135 sks	OWC cement	17.00	2295.00
1107A	68"	1/2" phenaseal/sk	1.15	78.20
1118B	300"	gel-flush	.20	60.00
5407A	7.02	tan mileage bulk trk	1.20	336.96
5502C	3.5 hrs	80 bbl VAC. TRK	85.00	297.50
1123	3000 gals	city water	14.90/1000	44.70
4402	2	2 7/8" top rubber plug	23.00	46.00
			Subtotal	4229.36
			6.30% SALES TAX	159.02
			ESTIMATED TOTAL	4388.38

Ravin 3737 ADenahel 239520
 AUTHORIZATION _____ TITLE _____ DATE _____

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.

down Drilling

Yates Center, KS

Lease Name: lehmann	Spud Date: 2-4-2011	Surface Pipe Size: 7"	Depth: 40'	T.D.:1027
Operator: Quest Development	Well # 11.5	Bit Diameter: 5 7/8"		
Footage taken	Sample type			
0_3	soil			
3_18	clay/gravel			
18_117	shale			
117_122	lime			
122_130	shale			
130_158	lime			
158_171	shale			
171_233	lime			
233_335	shale			
335_393	lime			
393_414	shale			
414_417	lime			
417_435	brown shale			
435_490	lime			
490_495	shale			
495_499	shale			
499_510	lime			
510_517	shale			
517_533	lime			
533_540	shale			
540_560	lime			
560_730	shale			
730_735	lime			
735_750	shale			
750_758	lime			
758_830	shale			
830_838	lime			
838_854	shale			
854_858	lime			
858_873	shale			
873_881	lime			
881_885	shale			
885_887	lime			
887_896	shale			
896_897	lime			
897_900	shale			
900_904	lime			
904_910	shale			
910_915	lime			
915_949	shale			
949_950	cap rock			
950_956	shale			
956_958	cap rock			
958_967	oil sand			
967_971	broken			
971_1027	shale			
	1027 T.D.			