



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: _____



1068624

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Lease Name: Fitzpatrick Bayou	Spud Date: 09/30/11	Surface Pipe Size: 8 5/8"	Depth: 40'	TD: 965
Operator: Ron-Bob Oil	Well #5	Bit Diameter: 6 3/4"		
Footage taken	Sample type	Footage taken	Sample type	
0_14	soil	895_897	shale	
14_26	sand	897_898	2nd cap	
26_123	shale	898_903	oil sand good free oil	
123_156	lime	903_906	badly broken a little free oil	
156_196	shale	906_965	shale	
196_200	lime		965 TD	
200_205	shale			
205_224	lime			
224_234	shale			
234_255	lime			
255_260	shale			
260_268	lime			
268_282	shale			
282_296	lime			
296_303	shale			
303_307	lime			
307_336	soft lime			
336_363	shale			
363_372	lime			
372_382	shale			
382_385	lime			
385_390	shale			
390_457	lime			
457_463	shale			
463_482	lime			
482_487	shale			
487_494	lime			
494_497	shale			
497_509	lime			
509_679	shale			
679_682	lime			
682_698	shale			
698_708	lime			
708_714	shale			
714_719	lime			
719_771	shale			
771_785	lime			
785_791	shale			
791_794	lime			
794_801	shale			
801_807	lime			
807_810	shale			
810_820	shale			
820_824	lime			
824_841	shale			
841_845	lime			
845_858	shale			
858_860	lime			
860_864	shale			
864_870	little odor			
870_873	sand, some odor			
873_879	sandy shale			
879_894	shale			
894_895	1st. Cap			

FED ID# 48-1214033
 MC ID# 165290
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3613A Y Road
 Madison, KS 66860

Hurricane Services, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Cement, Acid or Tools
 Service Ticket

4776

DATE 10-3-11

COUNTY Woodson CITY _____

CHARGE TO Ron & Bob Oil

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. FitzPatrick Bayou #5 CONTRACTOR Steve Leis

KIND OF JOB LongString SEC. _____ TWP. _____ RNG. _____

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge
		750.00
146 sks.	Quick Set Cement	2409.00
300 lbs.	Gel > Flush Ahead	75.00
4 hrs.	water Transport	400.00
4 hrs.	water Truck	320.00
2500 GAL.	City water	37.50
8.18 Ton	BULK TRK. MILES	314.93
35	PUMP TRK. MILES	105.00
	Mileage TRK. #290	52.50
2	PLUGS 2 7/8" Top Rubber	46.00
		7.3% SALES TAX 187.42
		TOTAL 4697.35

T.D. 967'

CSG. SET AT _____ VOLUME _____

SIZE HOLE 6 3/4"

TBG SET AT 952' VOLUME 5 1/2 Bbls.

MAX. PRESS. _____

SIZE PIPE 2 7/8"

PLUG DEPTH _____

PKER DEPTH _____

PLUG USED _____

TIME FINISHED _____

REMARKS: Rig up to 2 7/8" tubing, Break circulation with fresh water, 15 Bbl. Gel Flush, circulated Gel around To condition hole with fresh water, Mixed 146 sks Quick Set Cement, Shut down - wash out Pump & Lines. Release 2-Plugs > Displace Plugs with 5 1/2 Bbls water, Final Pumping @ 500 PSI - Bumped Plug to 1000 PSI close Tubing in w/ 1000 PSI
Good cement returns w/ 5 Bbl. Slurry
"Thank you"

EQUIPMENT USED

NAME Kelly Kimberlin UNIT NO. #201
Brad Butler
 HSI REP.

NAME Jerry #202, Delbert #105, James #144- #152
witnessed by Bob
 OWNER'S REP.