



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



1069756

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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KL L: 6 Ft

Casing: 7 inch

Well Name: Billinger 13-1

Location: Sec 1, 6S, 40W, Sherman Co. K

Joint No.	Joint Length, Ft		Total Footage, Ft		Depth KB, Ft		W/ Grade	Description
	Ft		Ft		(base of J)	(top of J)		
1	0.00		0.00		-416.80	-377.84	20	Centralizer
2	39.16		39.16		-377.64	-338.51		
3	39.13		78.29		-338.51	-299.34		
4	39.17		117.46		-299.34	-254.83		
5	44.51		161.97		-254.83	-210.23		
6	44.60		206.57		-210.23	-165.84		
7	44.39		250.96		-165.84	-126.68		
8	39.16		290.12		-126.68	-82.64		
9	44.04		334.16		-82.64	-43.52		
10	39.12		373.28		-43.52	-6.00		
11	37.52		410.80					
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
TOTAL			410.80					

# Jts Ran 10  
 Meas. 410.80  
 Set @ 416.80  
 Aprox TD @ 422



KB- 6 Ft  
Casing: 4.50 inch

Well Name: Billinger 13-1

Location: Sec 1, 6S, 40W, Sherman Co. K

Joint No.	Joint Length, Total Footage,		Depth KB, Ft (base of J)	Depth KB, Ft (top of J)	W/ Grade	Description
	Ft	Ft				
1	0.92	0.92	-1590.38	-1589.46	9.5# J55	Latch
2	42.61	43.53	-1589.46	-1546.85		Centralizer
3	42.53	86.06	-1546.85	-1504.32		Centralizer
4	42.63	128.69	-1504.32	-1461.69		Centralizer
5	42.64	171.33	-1461.69	-1419.06		Centralizer
6	42.14	213.47	-1419.06	-1376.91		Centralizer
7	31.90	245.37	-1376.91	-1345.01		Centralizer
8	42.60	287.97	-1345.01	-1302.41		Centralizer
9	40.31	328.28	-1302.41	-1262.10		Centralizer
10	42.13	370.41	-1262.10	-1219.97		Centralizer
11	42.53	412.94	-1219.97	-1177.44		Centralizer
12	42.58	455.52	-1177.44	-1134.86		Centralizer
13	42.25	497.77	-1134.86	-1092.61		Centralizer
14	42.43	540.20	-1092.61	-1050.18		Centralizer
15	41.35	581.55	-1050.18	-1008.83		Centralizer
16	42.28	623.83	-1008.83	-966.55		Centralizer
17	42.56	666.39	-966.55	-923.99		Centralizer
18	42.12	708.51	-923.99	-881.87		Centralizer
19	42.52	751.03	-881.87	-839.35		Centralizer
20	35.38	786.41	-839.35	-803.97		Centralizer
21	36.08	822.49	-803.97	-767.89		Centralizer
22	44.06	866.55	-767.89	-723.83		Centralizer
23	35.61	902.16	-723.83	-688.22		Centralizer
24	32.78	934.94	-688.22	-655.44		Centralizer
25	33.10	968.04	-655.44	-622.34		Centralizer
26	27.54	995.58	-622.34	-594.80		Centralizer
27	23.35	1018.93	-594.80	-571.45		Centralizer
28	29.87	1048.80	-571.45	-541.58		Centralizer
29	32.83	1081.63	-541.58	-508.75		Centralizer
30	43.71	1125.34	-508.75	-465.04		Centralizer
31	40.62	1165.96	-465.04	-424.42		Centralizer
32	38.49	1204.45	-424.42	-385.93		Centralizer
33	35.90	1240.35	-385.93	-350.03		Centralizer
34	39.18	1279.53	-350.03	-310.85		Centralizer
35	44.18	1323.71	-310.85	-266.67		Centralizer
36	36.50	1360.21	-266.67	-230.17		Centralizer
37	43.48	1403.69	-230.17	-186.69		Centralizer
38	36.14	1439.83	-186.69	-150.55		Centralizer
39	35.14	1474.97	-150.55	-115.41		Centralizer
40	38.22	1513.19	-115.41	-77.19		Centralizer
41	36.82	1550.01	-77.19	-40.37		Centralizer
42	34.37	1584.38	-40.37	-6.00		Centralizer

TOTAL 1584.38

# Jts Ran= 41  
Meas w/shoe 1584.38  
Set @ 1590.38  
PBTD @ 1546.85  
DISPLACE= 25.06