



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: _____



1073498

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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KB: 6 Ft

Casing: 7 inch

Well Name: Rogers 32-31B

Location: Sec 31, 5S, 39W, Cheyenne Co.

Joint No.	Joint Length, Ft	Total Footage, Ft	Depth KB, Ft (base of jt)	Depth KB, Ft (top of jt)	Wt/ Grade	Description
	0.00	0.00			.17	
1	41.71	41.71	-331.20	-289.49		Centralizer
2	34.86	76.57	-289.49	-254.63		
3	41.78	118.35	-254.63	-212.85		
4	42.05	160.40	-212.85	-170.80		
5	41.70	202.10	-170.80	-129.10		
6	37.47	239.57	-129.10	-91.63		
7	43.14	282.71	-91.63	-48.49		
8	42.49	325.20	-48.49	-6.00		
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
TOTAL	325.20					

Jts Ran 8
 Meas. 325.20
 Set @ 331.20
 Aprox TD @ 336
 Threads On 326.78



KB-GL: 6.6

Casing: P&A

Well Name: Rogers 32-31B | Location: Sec 31, 5S, 39W, Cheyenne Co. KS

Joint No.	Joint Length, Ft	Total Footage, Ft	Depth KB, Ft (base of jt)	Depth KB, Ft (top of jt)	Wt/ Grade	Description
1					85 SX @	P&A
2						ACROSS ZONE
3						1364 TO 931
4					35 SX @	HALF IN HALF OUT
5						372 TO SURFACE
6						
7					10 SX @	SURFACE
8						FROM 80 TO SURFACE
9						
10						
11					85 SX TOTAL	

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102
 Denver, Colorado 80202
 Phone: 303-296-3070
 Fax: 303-298-8143
 E-mail: bisonoil1@qwestoffice.net

REF. INVOICE # 8451
 LOCATION St Francis KS
 FOREMAN Justin Crisblaw

TREATMENT REPORT

DATE 2-5-11	WELL NAME Rogers 32-31B	SECTION 31	TWP 55	RSE 39W	COUNTY Cheyenne	FORMATION
CHARGE TO Excell			DWHR			
MAILING ADDRESS			OPERATOR			
CITY			CONTRACTOR			
STATE ZIP CODE			DISTANCE TO LOCATION 89			
TIME ARRIVED ON LOCATION 3:15			TIME LEFT LOCATION			

WELL DATA			PRESSURE LIMITATIONS			
PIPE SIZE	TUBING SIZE	PERFORATIONS	THEORETICAL		INSTRUCTED	
4 7/8						
TOTAL DEPTH 336	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG			
	TUBING WEIGHT	OPEN HOLE	STRING			
CASING SIZE 7	TUBING CONDITION		TUBING			
CASING DEPTH 331	PB 241	TREATMENT VIA	TYPE OF TREATMENT		TREATMENT RATE	
CASING WEIGHT 17	PACKER DEPTH		<input checked="" type="checkbox"/> SURFACE PIPE		BREAKDOWN BPM	
CASING CONDITION good			<input type="checkbox"/> PRODUCTION CASING		INITIAL BPM	
			<input type="checkbox"/> SOBBIC CEMENT		FINAL BPM	
			<input type="checkbox"/> ACID BREAKDOWN		MINIMUM BPM	
			<input type="checkbox"/> ACID STIMULATION		MAXIMUM BPM	
			<input type="checkbox"/> ACID SPOTTING		AVERAGE BPM	
			<input type="checkbox"/> MISC FLOOD			
			<input type="checkbox"/> OTHER		HYD. HP * RATE * PRESSURE * 40.8	

PRESSURE SUMMARY			
BREAKDOWN OF CIRCULATING	PSI	AVERAGE	PSI
FINAL DISPLACEMENT	PSI	ISIP	PSI
ANNULUS	PSI	5 MIN SIP	PSI
MAXIMUM	PSI	RELEASED	PSI
MINIMUM	PSI		

INSTRUCTIONS PRIOR TO JOB: **MIRU Safety Circ MAP 140 SKS of B3Lite Yield of 1.13 Mix 16 bbls of H2O Yield of 4.78 gal/sks @ 15.2 Displace 12 bbls of H2O Shutin**

Annulus: **1247 Capacity 0.115 80% excess**

JOB SUMMARY: **MIRU Safety Circ MAP Displace Shutin**

DESCRIPTION OF JOB EVENTS: **3:15pm 3:38pm 3:40pm 3:41pm 3:55pm 4:00pm**

3:59 10 200
4:00 12 180

6 bbls to pit Day House water Temp 39°F at valve

[Signature] **Push** **2/5/11**
 AUTHORIZATION TO PROCEED TITLE DATE

Customer hereby acknowledges and specifically agrees to the terms and conditions of this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-296-8143
 E-mail: bisonoil@gwesoiloffice.net

REF. INVOICE # 96/50
 LOCATION Goodland
 FOREMAN Randy Nivola

TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	RGE	COUNTY	FORMATION
2-6-11	Rogers 32-31B	31	5S	39W	Cheyenne	
CHANGE TO	OWNER		Noble			
MAILING ADDRESS	OPERATION					
CITY	CONTRACTOR		Excell Rig 2			
STATE ZIP CODE	DISTANCE TO LOCATION		88 mi			
TIME ARRIVED ON LOCATION	TIME LEFT LOCATION		10:00 Am			

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
1 7/8					
TOTAL DEPTH	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS-LOG		
1570					
CASING SIZE	TUBING WEIGHT	OPEN HOLE	STRING		
3 1/2 D.P.					
CASING DEPTH	TUBING CONDITION	TREATMENT VIA	TUBING		
CASING WEIGHT	PACKER DEPTH		TYPE OF TREATMENT		
13.3			TREATMENT RATE		
CASING CONDITION			<input type="checkbox"/> SURFACE PIPE <input type="checkbox"/> PRODUCTION CASING <input type="checkbox"/> SQUEEZE CEMENT <input type="checkbox"/> ACID BREAKDOWN <input type="checkbox"/> ACID STIMULATION <input type="checkbox"/> ACID SPOTTING <input type="checkbox"/> MISC PUMP <input checked="" type="checkbox"/> OTHER PFA		
			BREAKDOWN BPM INITIAL BPM FINAL BPM MINIMUM BPM MAXIMUM BPM AVERAGE BPM FWD HHP = RATE X PRESSURE X TIME		

INSTRUCTIONS PRIOR TO JOB: MTRU 5m core 5 bbls acid mix 35 psi @ 15.2 lb/gal water. 4 bbls mix water. Yield 1.36 gal. Displace w/ 10 bbls water. Core 5 bbls acid mix 35 psi @ 15.2 lb/gal. 4 bbls mix water. Displace w/ 2.7 bbls water. Core 5 bbls acid mix 35 psi @ 15.2 lb/gal. 1.5 bbls mix water. 1/2 bbls water. Rig down.

JOB SUMMARY:
 DESCRIPTION OF JOB EVENTS: MTRU 5m 1st plug @ 11:30 core 5 bbls acid mix + Displace
 2nd plug @ 3:22 core mix 1st plug 1364 core mix Displace 2nd plug @ 3:22
 MTRU 5m 1st plug 1364 core mix Displace 2nd plug @ 3:22
 10:00 am 11:15 11:30 11:35 11:48
 core mix Displace 11:210 am
 12:25 12:28 12:32 2:15
 3rd plug @ 12:32 core mix Displace Rig down
 12:54 12:54 1:00 1:05

Steve Charles Field Rep 2-6-11
 AUTHORIZATION TO PROCEED TITLE DATE

Customer hereby acknowledges and specifically agrees to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.