



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



1074562

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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**GARNETT TRUE VALUE HOMECENTER**  
 410 N. Maple  
 Garnett, KS 66032  
 (785) 448-7108 FAX (785) 448-7135

Merchant Copy  
**INVOICE**  
 THIS COPY IS NOT VALID AT THE POINT OF PURCHASE

Invoice: 10180082  
 Date: 12/27/11  
 Ship Date: 12/27/11  
 Invoice Date: 12/27/11  
 Due Date: 01/08/12

Ship To: ROGER KENT  
 2838 NE HOBBS RD  
 GARNETT, KS 66032  
 (785) 448-8888  
 (785) 448-8888

Order By: Mike  
 Order # 000387  
 Customer PO:

ORDER	SHIP	UOM	ITEM	DESCRIPTION	AN Price/Unit	PRICE	EXTENSION
18.00	16.00	PL	CPNP	MONARCH PALLET	16.0000 PL	16.0000	640.00
480.00	480.00	PL	CPNP	PORTLAND CEMENT 94H	6.4800 BAG	6.4800	4078.80

FILLED BY: \_\_\_\_\_ CHECKED BY: DATE SHIPPED: DRIVER: \_\_\_\_\_

SHIP VIA: ANDERSON COUNTY  
 RESERVED FOR PALLET AND IN GOOD CONDITION

Taxable: 4316.80  
 Non-taxable: 0.00  
 Tax #

Sales total: \$4316.80  
 Sales tax: 338.89  
**TOTAL: \$4655.70**

1 - Merchant Copy



**GARNETT TRUE VALUE HOMECENTER**  
 410 N. Maple  
 Garnett, KS 66032  
 (785) 448-7108 FAX (785) 448-7135

Merchant Copy  
**INVOICE**  
 THIS COPY IS NOT VALID AT THE POINT OF PURCHASE

Invoice: 10178806  
 Date: 12/19/11  
 Ship Date: 12/19/11  
 Invoice Date: 12/19/11  
 Due Date: 01/08/12

Ship To: ROGER KENT  
 2838 NE HOBBS RD  
 GARNETT, KS 66032  
 (785) 448-8888  
 (785) 448-8888

Order By: Mike  
 Order # 000387  
 Customer PO:

ORDER	SHIP	UOM	ITEM	DESCRIPTION	AN Price/Unit	PRICE	EXTENSION
890.00	890.00	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	8.9800 BAG	8.9800	8914.40
8.00	5.00	PL	CPNP	MONARCH PALLET	16.0000 PL	16.0000	78.00

FILLED BY: \_\_\_\_\_ CHECKED BY: DATE SHIPPED: DRIVER: \_\_\_\_\_

SHIP VIA: ANDERSON COUNTY  
 RESERVED FOR PALLET AND IN GOOD CONDITION

Taxable: 3989.40  
 Non-taxable: 0.00  
 Tax #

Sales total: \$3989.40  
 Sales tax: 311.18  
**TOTAL: \$4300.58**

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**R.J. Enterprise**  
**22082 NE Neosho RD**  
**Garnett, KS 66032**

**Sobba 5-I**

Start 1-4-2012

Finish 1-5-2012

1	soil	1	
39	lime	40	
36	shale	76	
14	lime	90	
112	shale	202	
31	lime	233	
15	shale	248	
2	lime	250	set 20' 7"
19	shale	269	ran 842.3' 2 7/8
9	lime	278	cemented to surface 84 sxs
20	shale	298	
9	lime	307	
6	shale	313	
39	lime	352	
14	shale	366	
16	lime	382	
4	shale	386	
18	lime	404	
182	shale	586	
14	lime	600	
61	shale	661	
27	lime	688	
22	shale	710	
10	lime	720	
12	shale	732	
10	lime	742	
7	shale	749	
10	lime	759	
12	shale	771	
9	sandy shale	780	odor
11	sandy shale	791	show
21	bkn sand	812	good show
37	shale	849	T.D.