



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



1074704

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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Form	ACO1 - Well Completion
Operator	H & B Petroleum Corp.
Well Name	Ouderkirk 15
Doc ID	1074704

#### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Tyep and Percent Additives
Surface	12.25	8.625	23	365	Class A Common	265	3%cc,2%gel
Production	7.875	5.5	15.5	3879	Class A Common	125	10%salt,2%gel
Production	7.875	5.5	15.5	3879	Lite-Wt	350	
Production	7.875	5.5	15.5	3879	60/40 Poz	100	4%gel

# ALLIED CEMENTING CO., LLC. 035817

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Russell, KS

DATE <u>10-3-11</u>	SEC. <u>7</u>	TWP. <u>10</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>3:00pm</u>	JOB FINISH <u>3:30pm</u>
LEASE <u>Under Kirk</u> WELL # <u>15</u>				LOCATION <u>Zurich 2w 25</u>		COUNTY <u>ROCKS</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)				<u>1/2 w Sinto</u>			

CONTRACTOR Southwind #4 OWNER \_\_\_\_\_

TYPE OF JOB Surface

HOLE SIZE \_\_\_\_\_ T.D. 366 CEMENT AMOUNT ORDERED 225 COM

CASING SIZE 8 5/8 DEPTH 365.46 3% oil 2% gel

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 15 ft

PERFS. \_\_\_\_\_

DISPLACEMENT 22.31

**EQUIPMENT**

PUMP TRUCK CEMENTER Heath

# 409 HELPER Todd

BULK TRUCK \_\_\_\_\_

# 410 DRIVER Ron

BULK TRUCK \_\_\_\_\_

# \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>225</u>	@	<u>16.25</u>	<u>3656.25</u>
POZMIX		@		
GEL	<u>4</u>	@	<u>21.25</u>	<u>85.00</u>
CHLORIDE	<u>8</u>	@	<u>58.20</u>	<u>465.60</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>237</u>	@	<u>2.25</u>	<u>533.25</u>
MILEAGE	<u>111.56/mile (34)</u>			<u>886.34</u>
				TOTAL <u>5626.48</u>

**REMARKS:**

Run 8 Joints of 8 5/8 & Landing Joint  
Est Circulation with mud pump  
Mix 225sx & Disp 22.31 bbl of #20  
Cement did Circulate!!  
Thanks!!

**SERVICE**

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>1125.00</u>
EXTRA FOOTAGE		@		<u>238.00</u>
MILEAGE	<u>68.34</u>	@	<u>7.00</u>	<u>478.38</u>
MANIFOLD		@		
		@		<u>136.00</u>
	<u>CUA 68.34</u>	@	<u>4.00</u>	<u>273.36</u>
				<u>1499.00</u>
				TOTAL <u>7476.74</u>

CHARGE TO: H&B Petroleum Corp  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL _____		

To Allied Cementing Co., LLC.  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Robert Stevenson  
SIGNATURE Robert Stevenson

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES 7476.74 7125.48  
DISCOUNT 351 IF PAID IN 30 DAYS

# ALLIED CEMENTING CO., LLC. 038313

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

*Russell KS*

DATE <u>10-9-2011</u>	SEC. <u>7</u>	TWP. <u>10 S</u>	RANGE <u>19 W</u>	CALLED OUT	ON LOCATION	JOB START <u>10:30 AM</u>	JOB FINISH <u>1:30 PM</u>
LEASE <u>04 DEER KIRK</u>	WELL# <u>15</u>	LOCATION <u>Zurich Ks. 2 W 2 S 1/2 W 19</u>			COUNTY <u>ROCKS</u>	STATE <u>KANSAS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR GOTHARD D&G, Rig #  
 TYPE OF JOB Production Staging (D-V)  
 HOLE SIZE 7 7/8 TD 3860 RTD  
 CASING SIZE 5 1/2 DEPTH 3879'  
 TUBING SIZE Latch DN. Plug DEPTH 3868'  
 DRILL PIPE DEPTH  
 TOOL DV Tool @ DEPTH 1662 FT  
 PRES. MAX 2000 # MINIMUM 1500 #  
 MEAS. LINE SHOE JOINT 11'  
 CEMENT LEFT IN CSG. 11'  
 PERFS. TOP Bottom  
 DISPLACEMENT 38 1/2 BBL 92 1/4 BBL  
 EQUIPMENT

OWNER  
 CEMENT  
 AMOUNT ORDERED 125 sx Comm. 10% Salt 2 gel  
350 sx Lite - wt  
100 sx 40 4% GEL  
 COMMON 1F5 @ 16.25 3006.25  
 POZMIX 40 @ 8.50 340.00  
 GEL 5 @ 21.25 106.25  
 CHLORIDE @  
 ASC @  
 Salt 10 @ 23.95 239.50  
 Lite 350 @ 14.50 5075.00  
 Flo Seal 87 # @ 2.70 234.90  
 HANDLING 590 @ 2.25 1327.50  
 MILEAGE 1116/4 @ 2.00 2232.00  
 TOTAL 67,536.00

PUMP TRUCK CEMENTER GLENN  
 # 409 HELPER TODD  
 BULK TRUCK  
 # 378 DRIVER MARK  
 BULK TRUCK  
 # 410 DRIVER RON  
481 11 Kevin W. GB.

REMARKS:  
Run 9 JTS. 5 1/2 15. #csq. Set @ 3879'  
Received Circulation. Circulate 1 HR. mix  
55 sx Scavenger, 125 sx Comm. 10% Salt 2 gel.  
Chase line, displace 92 1/4 BBL / 1000 Plug @ 1500 #.  
Drop D&G, open DV tool @ 1200 #, Circulate  
Mix 350 sx Lite - wt, Displace Plug & Chase DV.  
Tool @ 2000 #, cement Circulate  
30 sx @ Rathole TO SURFACE.  
THANKS

SERVICE  
 DEPTH OF JOB  
 PUMP TRUCK CHARGE 2225.00  
 EXTRA FOOTAGE @  
 MILEAGE 34 @ 7.00 238.00  
 MANIFOLD @  
34 @ 4.00 136.00  
 TOTAL 2599.00

CHARGE TO: H & B Petroleum Corp.  
 STREET  
 CITY STATE ZIP

X Cement did circulate  
to surface, put approx. 50 sx cement in pit.

To Allied Cementing Co., LLC.  
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PLUG & FLOAT EQUIPMENT  
 RR Float & Shoe 245.00  
 RR Latch Down Plug Assy @ N-C  
 RR 3 Baskets @ 236.00  
 RR 6 Centralizers @ 34.00 204.00  
 RR 10 Recip. Scratchers @ 83.00 830.00  
 RR 1-Weatherford D.V. Tool @ 2605.00  
 TOTAL 4120.00

PRINTED NAME Robert Stevenson  
 SIGNATURE Robert Stevenson

SALES TAX (if Any)  
 TOTAL CHARGES 17,255.00  
 DISCOUNT 20% IF PAID IN 30 DAYS