



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



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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# BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102  
 Denver, Colorado 80202  
 Phone: 303-296-3010  
 Fax: 303-298-8143  
 E-mail: bisonoil1@qwestoffice.net

REF. INVOICE # 11000

LOCATION St. Francis

FOREMAN Randy Newton

## TREATMENT REPORT

DATE <u>8-16-12</u>	WELL NAME <u>Rogers SWD #1</u>	SECTION <u>32</u>	TWP <u>55</u>	RGE <u>39W</u>	COUNTY <u>Stearns</u>	FORMATION
CHARGE TO <u>Noble</u>		OWNER <u>Noble</u>				
MAILING ADDRESS		OPERATOR				
CITY		CONTRACTOR <u>Excell 173</u>				
STATE ZIP CODE		DISTANCE TO LOCATION <u>90 mi</u>				
TIME ARRIVED ON LOCATION <u>11:30 a.m.</u>		TIME LEFT LOCATION <u>9:50 a.m.</u>				

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE	TUBING SIZE	PERFORATIONS	THEORETICAL	INSTRUCTED	
<u>12 1/4</u>					
TOTAL DEPTH <u>405</u>	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG		
	TUBING WEIGHT	OPEN HOLE	STRING		
CASING SIZE <u>9 7/8"</u>	TUBING CONDITION		TUBING		

WELL DATA			TYPE OF TREATMENT		TREATMENT RATE	
CASING DEPTH <u>397</u>	PACKER DEPTH <u>ply 35'</u>	TREATMENT VIA	<input checked="" type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM		
CASING WEIGHT <u>305</u>			<input type="checkbox"/> PRODUCTION CASING	INITIAL BPM		
CASING CONDITION <u>good</u>			<input type="checkbox"/> SQUEEZE CEMENT	FINAL BPM		

PRESSURE SUMMARY				TREATMENT RATE	
BREAKDOWN or CIRCULATING	psi	AVERAGE	psi	<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM
FINAL DISPLACEMENT	psi	ISIP	psi	<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM
ANNULUS	psi	5 MIN SIP	psi	<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM
MAXIMUM	psi	15 MIN SIP	psi	<input type="checkbox"/> MISC PUMP	
MINIMUM	psi			<input type="checkbox"/> OTHER	HYD HHP = RATE X PRESSURE X 40.8

INSTRUCTIONS PRIOR TO JOB MTRU sm circ 10 bbl Dye 7 bbls fresh MTP 133-lit @ 15.2#  
per gal water req 4.2 bbls per sk field ok 107 cu ft sk mix until Dye is seen shut down  
drop plug Displace 27.5 bbls water shut in rig down  
mixed 20 bbl for 200 SKS

JOB SUMMARY					
DESCRIPTION OF JOB EVENTS					
<u>MTRU</u>	<u>sm</u>	<u>circ</u>	<u>MTP</u>	<u>drop</u>	
<u>4:00 AM</u>	<u>8:00 AM</u>	<u>8:06 AM</u>	<u>8:10 AM</u>	<u>8:18 AM</u>	
<u>Displace</u>	<u>shut in</u>	<u>Rig down</u>			
<u>8:23 AM</u>	<u>8:32 AM</u>	<u>8:35 AM</u>			
<u>8:25 10 200</u>					
<u>8:27 20 300</u>					
<u>8:30 27.5 300</u>					

5 bbls cement to pit

38.11

Tony  
 AUTHORIZATION TO PROCEED

TITLE

DATE

Customers 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.

# BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102  
 Denver, Colorado 80202  
 Phone: 303-296-3010  
 Fax: 303-298-8143  
 E-mail: bisonoil1@qwestoffice.net

REF. INVOICE # 11001  
 LOCATION St. Francis  
 FOREMAN Zandy Newton

## TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	RGE	COUNTY	FORMATION
8-20-12	Roger SWD	32	55	39W	cheyenne	
CHARGE TO <u>Noble Energy</u>			OWNER <u>Noble</u>			
MAILING ADDRESS			OPERATOR <del>EX</del>			
CITY			CONTRACTOR <u>Excell Rig 3</u>			
STATE ZIP CODE			DISTANCE TO LOCATION <u>90 mi.</u>			
TIME ARRIVED ON LOCATION <u>10:30 AM</u>			TIME LEFT LOCATION <u>3:30 p.m.</u>			

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE <u>8 3/4"</u>	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
TOTAL DEPTH <u>3350'</u>	TUBING DEPTH	SHOTS/FT		SURFACE PIPE ANNULUS LONG	
	TUBING WEIGHT	OPEN HOLE		STRING	
CASING SIZE <u>7"</u>	TUBING CONDITION			TUBING	
CASING DEPTH <u>3326'</u>	<u>2289'</u>	TREATMENT VIA	TYPE OF TREATMENT		TREATMENT RATE
CASING WEIGHT <u>23#</u>	PACKER DEPTH		<input type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM	
CASING CONDITION <u>good</u>			<input checked="" type="checkbox"/> PRODUCTION CASING	INITIAL BPM	
			<input type="checkbox"/> SQUEEZE 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 PUMP		
			<input type="checkbox"/> OTHER	HYD HHP = RATE X PRESSURE X 40.8	

INSTRUCTIONS PRIOR TO JOB MTRU sm circ 10 bbl mud flush (rep 128) 10 bbls Fresh H<sub>2</sub>O m+p  
275 sts of N-Gel-12 @ 12 1/2 gal water Reg of 12.04 gal/stk 79 BBLs mix water yield of  
2.21 cu ft/stk then m+p 250 sts B6-11x @ 13.8 1/2 gal water Reg of 6.28 gal/stk 38  
BBLs mix water yield of 1.33 cu ft/stk, shut down dropping Displace w/ 129.2 BBLs H<sub>2</sub>O  
land plug bleedoff pressure rig down 20% excess

JOB SUMMARY

DESCRIPTION OF JOB EVENTS	MTRU	SM	CIRC	MTP	MTP	DROPPING
	10:30 AM	12:50 p.m.	1:05 p.m.	1:11 p.m.	1:46 p.m.	2:10 p.m.
Displace						
	2:15 p.m.					
	2:18	10	100			
	2:20	20	200			
	2:22	30	200			
	2:25	40	300			
	2:27	50	300			
	2:29	60	400			
	2:32	70	500			
	2:35	80	600			
				2:52 p.m.		
					20 BBL cement to p.t.	

T. Th  
 AUTHORIZATION TO PROCEED

TITLE \_\_\_\_\_ DATE 8-20-12

145.50

Customers 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.



**WATER ANALYSIS**

COMPANY: NOBLE ENERGY  
\_\_\_\_\_  
\_\_\_\_\_  
FAX: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

LEASE: ROGER SWD  
\_\_\_\_\_  
DATE: 12/13/2012  
\_\_\_\_\_  
SAMPLE NUMBER: WS12131201

DISSOLVED SOLIDS:  
CATIONS:

Sodium, Na (Calc) ppm: 5,801  
Calcium, Ca, ppm: 4,085  
Magnesium, Mg, ppm: 1,071

WELL DATA

Depth: \_\_\_\_\_ ft  
Formation: \_\_\_\_\_  
Water BPD: \_\_\_\_\_

ANIONS

Chlorides, Cl ppm: 17,000  
Sulfates, SO4, ppm: 800  
Bicarbonates, HCO3 ppm: 2,935  
Carbonates, CO3 ppm: \_\_\_\_\_  
  
Total Dissolved Solids (Calculated) ppm: 31,695  
Derived from Specific Gravity, ppm: 32,800  
Iron, Fe (Total) ppm: 3  
Sulfide, as H2S ppm: 0

OTHER PROPERTIES

pH: 7.2  
Specific Gravity: 1.022 70 °F  
Resisivity (Meter) ohm\*M: 0.22 70 °F  
Total Hardness, ppm: 5156

REMARKS AND RECOMMENDATIONS:

\_\_\_\_\_  
This water sample has a viscosity of 3 cP where fresh water is 1 cP.  
\_\_\_\_\_

Analyst: Matthew Hoffman