



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1079144  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed  
Form must be Signed  
All blanks must be Filled

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
- Plug Back       Conv. to GSW       Conv. to Producer
- 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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1079144

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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

<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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	SandRidge Exploration and Production LLC
Well Name	Lori 2-2H
Doc ID	1079144

#### Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
5	8674-9005	4291 bbls water, 36 bbls acid, 74M lbs sd, 4327 TLTR	
5	8263-8594	4396 bbls water, 36 bbls acid, 72M lbs sd, 9844 TLTR	
5	7852-8152	4264 bbls water, 36 bbls acid, 75M lbs sd, 13372 TLTR	
5	7590-7772	4986 bbls water, 36 bbls acid, 75M lbs sd, 18513 TLTR	
5	7020-7537	4317 bbls water, 36 bbls acid, 76M lbs sd, 22975 TLTR	
5	6650-6908	4241 bbls water, 36 bbls acid, 76M lbs sd, 27345 TLTR	
5	6250-6539	4301 bbls water, 36 bbls acid, 76M lbs sd, 31759 TLTR	
5	5840-6456	4255 bbls water, 36 bbls acid, 75M lbs sd, 36112 TLTR	
5	5386-5628	4244 bbls water, 36 bbls acid, 75M lbs sd, 40430 TLTR	
5	4975-5306	4033 bbls water, 36 bbls acid, 75M lbs sd, 44527 TLTR	

Form	ACO1 - Well Completion
Operator	SandRidge Exploration and Production LLC
Well Name	Lori 2-2H
Doc ID	1079144

### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Conductor	30	20	75	90	Edge Services Grade A Cement	9	none
Surface	12.25	9.63	36	920	HL Standard/Standard	450	6% Bentonite, 3% Calcium Chloride, Pellet, .25 lbm Poly-E-Flake
Intermediate	8.75	7	26	5240	50/50 POS Standard/Premium	310	2% bentonite, .4% Halad(R)-9, 2 lbm Kol-Seal
Liner	6.13	4.5	13.5	9115	50/50 Poz Standard	440	.4% Halad(R)-9, 10lbm Kol-Seal, 2% Bentonite, .3% CFR-3, W/O Defoamer, .25 lbm poly-e-flake

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2078  
Wichita, KS 67202-3802



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Mark Sievers, Chairman  
Ward Loyd, Commissioner  
Thomas E. Wright, Commissioner

Sam Brownback, Governor

April 19, 2012

Tiffany Golay  
SandRidge Exploration and Production LLC  
123 ROBERT S. KERR AVE  
OKLAHOMA CITY, OK 73102-6406

Re: ACO1  
API 15-007-23859-01-00  
Lori 2-2H  
SE/4 Sec.02-35S-10W  
Barber County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,  
Tiffany Golay



# INVOICE

DATE	INVOICE #
4/10/2012	3053

BILL TO
SANDRIDGE ENERGY, INC. ATTN: PURCHASING MANAGER 123 ROBERT S. KERR AVENUE OKLAHOMA CITY, OK 73102

REMIT TO
EDGE SERVICES, INC. BILLING DEPARTMENT PO BOX 14201 OKLAHOMA CITY, OK 73113

STARTING D...	WORK ORDER	RIG NUMBER	LEASE NAME	Terms
4/9/2012	WO #2549	UNIT #310	LORI 2-2 H	Due on rec...

Description	Amount
DRILLED 90' OF 30" CONDUCTOR HOLE DRILLED 6' OF 76" HOLE & SET 6' x 6' TINHORN CELLAR FURNISHED 90' OF 20" CONDUCTOR PIPE FURNISHED WELDER AND MATERIALS FURNISHED GROUT - 9 YARDS OF GRADE A CEMENT DRILL MOUSE HOLE FURNISHED 80' OF 16" CONDUCTOR PIPE FOR MOUSE HOLE  TOTAL BID \$	23,150.00
Thank you for your business.	<b>TOTAL</b> \$23,150.00

API No.
OTC/OCC Operator No.

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002C  
Rev. 1996

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4(h)

ATTENTION: IMPORTANT REGULATORY DOCUMENT  
retain for your records and file with  
appropriate agency.

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name				OCC District
*Operator	<b>SANDRIDGE ENERGY INC EBUSINESS</b>			OCC/OTC Operator No
*Well Name/No.	<b>Lori 2-2H</b>			County <b>Barber</b>
*Location	1/4	1/4	1/4	1/4
	Sec	<b>2</b>	Twp	<b>35S</b>
			Rge	<b>10W</b>

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date		<b>4/17/2012</b>				
*Size of Drill Bit (Inches)						
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)						
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level		<b>920</b>				
Type of Cement (API Class) In first (lead) or only slurry		<b>HL STANDARD</b>				
In second slurry		<b>STANDARD</b>				
In third slurry						
Sacks of Cement Used In first (lead) or only slurry		<b>250</b>				
In second slurry		<b>200</b>				
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry		<b>477</b>				
In second slurry		<b>240</b>				
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)		<b>874.43</b>				
Cement left in pipe (ft)		<b>46.2</b>				

*Amount of Surface Casing Required (from Form 1000)	ft.
---	-----

*Was cement circulated to Ground Surface? <input type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Was Cement Bond Log run? <input type="checkbox"/> Yes <input type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth? ft

**CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM**

\* Designates items to be completed by Operator.  
Items not so designated shall be completed by the Cementing Company.

Remarks

**Stage #1/Slurry #1:** Water Spacer


**Stage #1/Slurry #2:** halliburton light standard w/ EXTENDACEM (TM) SYSTEM, 6 % Bentonite, 3 % Calcium Chloride, Pellet, 0.25 lbm Poly-E-Flake.

**Stage #1/Slurry #3:** Standard w/ SWIFTCEM (TM) SYSTEM, 2 % Calcium Chloride, Pellet, 0.125 lbm Poly-E-Flake.

\*Remarks

**CEMENTING COMPANY**

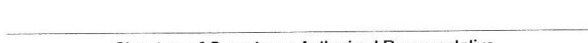
I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



\_\_\_\_\_  
Signature of Cementer or Authorized Representative

**OPERATOR**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.



\_\_\_\_\_  
Signature of Operator or Authorized Representative

Name & Title Printed or Typed

**DIEGO TORRES, Service Supervisor**

---

**Halliburton Energy Services**

---

Address

**701 DISPENSARY RD**

---

City

**BURNS FLAT**

---

State	Zip
<b>OK</b>	<b>73624</b>

---

Telephone (AC) Number

**580-562-1500**

---

Date

**4/17/2012**

\*Name & Title Printed or Typed

---

\*Operator

---

\*Address

---

\*City

---

*State	*Zip

---

\*Telephone (AC) Number

---

\*Date

---

**INSTRUCTIONS**

1. A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
- B) An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
- C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
2. Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
4. **IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**



API No.
OTC/OCC Operator No.

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002C  
Rev. 1996

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
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All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

**TYPE OR USE BLACK INK ONLY**

*Field Name				OCC District		
*Operator <b>SANDRIDGE ENERGY INC EBUSINESS</b>				OCC/OTC Operator No		
*Well Name/No. <b>Lori 2-2H</b>				County <b>Barber</b>		
*Location 1/4 1/4 1/4 1/4		Sec <b>2</b>	Twp <b>35S</b>	Rge <b>10W</b>		

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date				<b>4/25/2012</b>		
*Size of Drill Bit (Inches)						
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)						
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level				<b>5240</b>		
Type of Cement (API Class) In first (lead) or only slurry				<b>50/50 POS STANDARD</b>		
In second slurry				<b>PREMIUM</b>		
In third slurry						
Sacks of Cement Used In first (lead) or only slurry				<b>135</b>		
In second slurry				<b>175</b>		
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry				<b>208</b>		
In second slurry				<b>208</b>		
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)				<b>2296</b>		
Cement left in pipe (ft)				<b>91.35</b>		

*Amount of Surface Casing Required (from Form 1000)	ft.
---	-----

*Was cement circulated to Ground Surface? <input type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Was Cement Bond Log run? <input type="checkbox"/> Yes <input type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth? ft

**CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM**


\* Designates items to be completed by Operator.  
Items **not** so designated shall be completed by the Cementing Company.

Remarks  
**Stage #1/Slurry #1:** Water Spacer  
**Stage #1/Slurry #2:** 50/50 Poz Standard w/ ECONOCEM (TM) SYSTEM, 2 % Bentonite, 0.4 % Halad(R)-9, 2 lbm Kol-Seal, 2 % Bentonite.  
**Stage #1/Slurry #3:** PREMIUM w/ HALCEM (TM) SYSTEM, 0.4 % Halad(R)-9, 2 lbm Kol-Seal.

\*Remarks

**CEMENTING COMPANY**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



\_\_\_\_\_  
Signature of Cementer or Authorized Representative

**OPERATOR**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.

\_\_\_\_\_  
Signature of Operator or Authorized Representative

Name & Title Printed or Typed  
**DIEGO TORRES, Service Supervisor**

**Halliburton Energy Services**

Address  
**701 DISPENSARY RD**

City  
**BURNS FLAT**

State  
**OK**

Zip  
**73624**

Telephone (AC) Number  
**580-562-1500**

Date  
**4/25/2012**

\*Name & Title Printed or Typed

\*Operator

\*Address

\*City

\*State | \*Zip

\*Telephone (AC) Number

\*Date

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appropriate agency.

HALLIBURTON

REGULATORY DEPT  
SANDRIDGE ENERGY  
**Cementing Job Summary**

The Road to Excellence Starts with Safety

Sold To #: 305021	Ship To #: 2921774	Quote #:	Sales Order #: 9477288
Customer: SANDRIDGE ENERGY INC EBUSINESS		Customer Rep: Edwards, Tripp	
Well Name: Lori	Well #: 2-2H	API/UWI #:	
Field:	City (SAP): KIOWA	County/Parish: Barber	State: Kansas
Legal Description: Section 2 Township 35S Range 10W			
Contractor: Unit Drilling *		Rig/Platform Name/Num: Unit 310	
Job Purpose: Cement Production Liner			
Well Type: Development Well		Job Type: Cement Production Liner	
Sales Person: NGUYEN, VINH		Srvc Supervisor: WALTON, SCOTTY	MBU ID Emp #: 478229

Job Personnel

HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #
TURNER, DANIEL J	9.5	461812	WALTON, SCOTTY Dwayne	9.5	478229	Roger, Thomas Daniel Vanderhorst	9.5	?????? ??????

Equipment

HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way

Job Hours

Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours
4-30-12	1	0	5-1-12	8.5	2			

TOTAL Total is the sum of each column separately

Job

Job Times

Formation Name	Formation Depth (MD)	Top	Bottom	Called Out	Date	Time	Time Zone
Form Type	9756. ft			On Location	30 - Apr - 2012	23:00	CST
Job depth MD				Job Started	01 - May - 2012	06:17	CST
Water Depth				Job Completed	01 - May - 2012	07:17	CST
Perforation Depth (MD)	From	To		Departed Loc	01 - May - 2012	08:30	CST

Well Data

Description	New / Used	Max pressure psig	Size in	ID in	Weight lbm/ft	Thread	Grade	Top MD ft	Bottom MD ft	Top TVD ft	Bottom TVD ft
Production Liner Open Hole				6.125				5245.	9178.		
Intermediate Casing	Unknown		7.	6.184	29.	LTC	N-80	.	423.		
Production Liner	Unknown		4.5	4.	11.6		P-110	4935.	9178.		
Drill Pipe	Unknown		4.	3.34	14.	Unknown		.	5334.		

Tools and Accessories

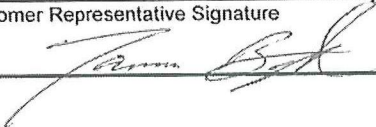
Type	Size	Qty	Make	Depth	Type	Size	Qty	Make	Depth	Type	Size	Qty	Make
Guide Shoe					Packer					Top Plug			
Float Shoe					Bridge Plug					Bottom Plug			
Float Collar					Retainer					SSR plug set			
Insert Float										Plug Container			
Stage Tool										Centralizers			

Miscellaneous Materials

Gelling Agt	Conc	Surfactant	Conc	Acid Type	Qty	Conc	%
Treatment Fld	Conc	Inhibitor	Conc	Sand Type	Size	Qty	

Fluid Data

Stage/Plug #: 1
-----------------

Fluid #	Stage Type	Fluid Name	Qty	Qty uom	Mixing Density lbm/gal	Yield ft <sup>3</sup> /sk	Mix Fluid Gal/sk	Rate bbl/min	Total Mix Fluid Gal/sk
1	Rig Caustic Water Spacer		10.00	bbl	8.5	.0	.0	.0	
2	50/50 POZ STANDARD ( w/ 2% extra gel)	ECONOCEM (TM) SYSTEM (452992)	430.0	sacks	13.6	1.59	6.91		6.91
	0.4 %	HALAD(R)-9, 50 LB (100001617)							
	10 lbm	KOL-SEAL, BULK (100064233)							
	2 %	BENTONITE, BULK (100003682)							
	0.3 %	CFR-3, W/O DEFOAMER, 50 LB SK (100003653)							
	0.25 lbm	POLY-E-FLAKE (101216940)							
	6.906 Gal	FRESH WATER							
<b>Calculated Values</b>		<b>Pressures</b>			<b>Volumes</b>				
Displacement		Shut In: Instant		Lost Returns		Cement Slurry		Pad	
Top Of Cement		5 Min		Cement Returns		Actual Displacement		Treatment	
Frac Gradient		15 Min		Spacers		Load and Breakdown		Total Job	
<b>Rates</b>									
Circulating		Mixing		Displacement			Avg. Job		
Cement Left In Pipe		Amount	80 ft	Reason	Shoe Joint				
Frac Ring # 1 @	ID	Frac ring # 2 @	ID	Frac Ring # 3 @	ID	Frac Ring # 4 @	ID		
The Information Stated Herein Is Correct				Customer Representative Signature					
									

*The Road to Excellence Starts with Safety*

<b>Sold To #:</b> 305021	<b>Ship To #:</b> 2921774	<b>Quote #:</b>	<b>Sales Order #:</b> 9477288
<b>Customer:</b> SANDRIDGE ENERGY INC EBUSINESS		<b>Customer Rep:</b> Edwards, Tripp	
<b>Well Name:</b> Lori		<b>Well #:</b> 2-2H	<b>API/UWI #:</b>
<b>Field:</b>	<b>City (SAP):</b> KIOWA	<b>County/Parish:</b> Barber	<b>State:</b> Kansas
<b>Legal Description:</b> Section 2 Township 35S Range 10W			
<b>Lat:</b> N 0 deg. OR N 0 deg. 0 min. 0 secs.		<b>Long:</b> E 0 deg. OR E 0 deg. 0 min. 0 secs.	
<b>Contractor:</b> Unit Drilling *		<b>Rig/Platform Name/Num:</b> Unit 310	
<b>Job Purpose:</b> Cement Production Liner			<b>Ticket Amount:</b>
<b>Well Type:</b> Development Well		<b>Job Type:</b> Cement Production Liner	
<b>Sales Person:</b> NGUYEN, VINH		<b>Srvc Supervisor:</b> WALTON, SCOTTY	<b>MBU ID Emp #:</b> 478229

Activity Description	Date/Time	Cht #	Rate bbl/min	Volume bbl		Pressure psig		Comments
				Stage	Total	Tubing	Casing	
Call Out	04/30/2012 18:00							Scotty Walton, Daniel Turner, Daniel Vanderhorst, Roger Thomas
Pre-Convoy Safety Meeting	04/30/2012 19:30							Scotty Walton, Daniel Turner, Daniel Vanderhorst, Roger Thomas
Depart from Service Center or Other Site	04/30/2012 20:00							
Arrive At Loc	04/30/2012 23:00							Arrived at Location Safely, Went over job procedures, calculations, and safety hazards.
Assessment Of Location Safety Meeting	04/30/2012 23:05							Identified all Potential hazards and Safe Work Zones
Pre-Rig Up Safety Meeting	05/01/2012 00:15							All HES Personell Present (watch for trip hazards, low lite areas, pinch points , confined spaces, and wear all appropriate PPE)
Rig-Up Equipment	05/01/2012 00:30							
Rig-Up Completed	05/01/2012 01:30							Rig Up Completed Safely
Pre-Job Safety Meeting	05/01/2012 06:00							All HES, Customer Rep., and Rig Crew Present ( Went over dangers of being near pressurized lines, PPE, Pumping Procedures, heat stress and safe zones, muster point, and nearest hospital)

Sold To # : 305021

Ship To # :2921774

Quote # :

Sales Order # : 9477288

SUMMIT Version: 7.3.0021

Tuesday, May 01, 2012 08:12:00

## Cementing Job Log

Activity Description	Date/Time	Cht #	Rate bbl/min	Volume bbl		Pressure psig		Comments
				Stage	Total	Tubing	Casing	
Pressure Test	05/01/2012 06:17							Test Lines to 5000PSI ( Rig Floor Clear, and Pumping Equipment area Clear)
Pump Water	05/01/2012 06:22		5	10	0		700.0	Pump 10BBL Of Freshwater
Pump Spacer	05/01/2012 06:25		5	10	0		750.0	Pump 10BBL of Castic Water at 8.5PPG
Pump Water	05/01/2012 06:27		5	10	0		700.0	Pump 10BBL Of Freshwater
Pump Lead Cement	05/01/2012 06:31		6	122	0		795.0	Pumped 122BBL Of 13.6PPG 50/50 POZ Premium Cement 430SKS (1.59ft3/sk, 6.91gal/sk)
Shutdown	05/01/2012 06:50		0	122	122		.0	Pumping Cement Completed
Clean Lines	05/01/2012 06:51		10	10	10		.0	Clean Pumps and Lines
Drop Top Plug	05/01/2012 06:54							Plug Left Cementing Head
Pump Displacement	05/01/2012 06:55		7	109	0		110.0	Started Displacement Pumping 7BPM Until Displacement Reaches Cement
Displ Reached Cmnt	05/01/2012 06:58		6	109	25		1100.0	Slowed Rate from 7BPM to 6BPM
Slow Rate	05/01/2012 07:01		3	109	40		380.0	Slowed Rate Shear Liner Plug
Other	05/01/2012 07:03		3	109	45		510.0	Sheared Liner Plug At 45BBL of Displacement Gone
Pump Displacement	05/01/2012 07:04		6	109	46		1400.0	Caught Liner Plug Continued Displacement
Slow Rate	05/01/2012 07:12		3	109	99		750.0	Slow Rate To Bump Plug
Bump Plug	05/01/2012 07:15		3	109	109		1900.0	Landed Plug With 1000PSI Over Pumping Pressure Full Returns Thru Job
Check Floats	05/01/2012 07:17		0	109	109		.0	Floats Held .5BBL Returned
Pre-Rig Down Safety Meeting	05/01/2012 07:18							All HES Personell Present ( Went Over Heat Stress, PPE, Pinch Points, Trip Hazards, and Importance of Communication)

Sold To # : 305021

Ship To # :2921774

Quote # :

Sales Order # :

9477288

SUMMIT Version: 7.3.0021

Tuesday, May 01, 2012 08:12:00

# HALLIBURTON

## Cementing Job Log

Activity Description	Date/Time	Cht #	Rate bbl/min	Volume bbl		Pressure psig		Comments
				Stage	Total	Tubing	Casing	
Rig-Down Equipment	05/01/2012 07:20							
Rig-Down Completed	05/01/2012 08:20							Rig Down Completed Safely
Depart Location Safety Meeting	05/01/2012 08:25							Scotty Walton, Daniel Turner, Daniel Vanderhorst, Roger Thomas
Depart Location for Service Center or Other Site	05/01/2012 08:30							Scotty Walton, Daniel Turner, Daniel Vanderhorst, Roger Thomas

Sold To #: 305021

Ship To #: 2921774

Quote #:

Sales Order #:

9477288

SUMMIT Version: 7.3.0021

Tuesday, May 01, 2012 08:12:00





5,547	92	2.55 Baker Hughes INTEQ	MWD	4,798	1,176	1,175.23	43.64	0.63
5,608	92.1	2.45 Baker Hughes INTEQ	MWD	4,795	1,237	1,236.14	46.19	0.3
5,669	90.9	2.82 Baker Hughes INTEQ	MWD	4,794	1,298	1,297.05	49	2.06
5,761	90	2.73 Baker Hughes INTEQ	MWD	4,793	1,390	1,388.94	53.45	0.95
5,852	89.6	3.11 Baker Hughes INTEQ	MWD	4,793	1,481	1,479.82	58.08	0.66
5,944	90	3.01 Baker Hughes INTEQ	MWD	4,794	1,573	1,571.69	63	0.45
6,036	90.7	3.46 Baker Hughes INTEQ	MWD	4,793	1,665	1,663.54	68.19	0.97
6,126	91.8	2.36 Baker Hughes INTEQ	MWD	4,791	1,755	1,753.40	72.76	1.7
6,217	92.4	2.26 Baker Hughes INTEQ	MWD	4,788	1,846	1,844.27	76.42	0.66
6,309	91.6	0.46 Baker Hughes INTEQ	MWD	4,785	1,938	1,936.18	78.6	2.14
6,401	88.7	2.01 Baker Hughes INTEQ	MWD	4,784	2,030	2,028.15	80.59	3.55
6,481	88.5	3.71 Baker Hughes INTEQ	MWD	4,787	2,120	2,118.00	85.07	1.91
6,586	89.4	3.64 Baker Hughes INTEQ	MWD	4,788	2,215	2,212.79	91.16	1.01
6,681	90.9	4.67 Baker Hughes INTEQ	MWD	4,788	2,310	2,307.54	98.05	1.9
6,777	91.4	4.28 Baker Hughes INTEQ	MWD	4,786	2,406	2,403.22	105.53	0.65
6,874	90.7	3.65 Baker Hughes INTEQ	MWD	4,784	2,502	2,499.97	112.24	0.96
6,969	92.3	3.15 Baker Hughes INTEQ	MWD	4,782	2,597	2,594.77	117.87	1.71
7,065	92.8	3.48 Baker Hughes INTEQ	MWD	4,778	2,693	2,690.51	123.42	0.69
7,160	95	2.88 Baker Hughes INTEQ	MWD	4,771	2,788	2,785.14	128.68	2.32
7,256	91.8	2.15 Baker Hughes INTEQ	MWD	4,766	2,884	2,880.87	132.88	3.42
7,352	91.9	0.89 Baker Hughes INTEQ	MWD	4,762	2,980	2,976.79	135.42	1.32
7,448	92.2	1.63 Baker Hughes INTEQ	MWD	4,762	3,076	3,072.70	137.53	0.82
7,543	91.5	1.81 Baker Hughes INTEQ	MWD	4,756	3,171	3,167.61	140.38	0.71
7,640	90.9	1.82 Baker Hughes INTEQ	MWD	4,754	3,268	3,264.54	143.46	0.63
7,735	90.9	0.82 Baker Hughes INTEQ	MWD	4,753	3,363	3,359.50	145.64	1.05
7,831	90.7	0.11 Baker Hughes INTEQ	MWD	4,751	3,459	3,455.49	146.42	0.78
7,927	88.9	359.95 Baker Hughes INTEQ	MWD	4,752	3,554	3,551.49	146.47	1.87
8,022	89.7	1.34 Baker Hughes INTEQ	MWD	4,753	3,649	3,646.47	147.54	1.67
8,117	89.9	0.78 Baker Hughes INTEQ	MWD	4,753	3,744	3,741.45	149.3	0.66
8,213	90.1	1.74 Baker Hughes INTEQ	MWD	4,753	3,840	3,837.43	151.41	1.02
8,309	91	0.3 Baker Hughes INTEQ	MWD	4,752	3,936	3,933.40	153.12	1.74
8,405	89.8	0.57 Baker Hughes INTEQ	MWD	4,751	4,032	4,029.40	153.85	1.21
8,502	90.4	1.16 Baker Hughes INTEQ	MWD	4,751	4,129	4,126.39	155.91	0.8
8,598	91.9	1.18 Baker Hughes INTEQ	MWD	4,749	4,225	4,222.34	157.27	1.65
8,694	93.1	1.51 Baker Hughes INTEQ	MWD	4,745	4,321	4,318.22	159.52	1.28
8,790	92.3	0.66 Baker Hughes INTEQ	MWD	4,741	4,417	4,414.10	161.34	1.22
8,886	92.1	2.65 Baker Hughes INTEQ	MWD	4,737	4,513	4,509.98	164.11	2.08
8,981	91.9	2.22 Baker Hughes INTEQ	MWD	4,734	4,608	4,604.84	168.14	0.55
9,115	91.9	2.22 Baker Hughes INTEQ	MWD	4,729	4,742	4,738.66	173.33	0.04

Section 35  
34S 10W

Section 36  
34S 10W

Section 31  
34S 9W

BHL: 9115'  
-98.352494 37.035213



Bottom Perf: 8674'  
-98.353866 37.034063

Section 2  
35S 10W

Section 1  
35S 10W

KATHLEEN 1-1H



Section 6  
35S 9W

Miss Entry: 4975'  
-98.367561 37.022737

Top Perf: 4970'  
-98.367561 37.022737

LORI 2-2H



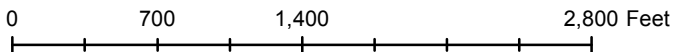
Section 11  
35S 10W

Section 12  
35S 10W

Section 7  
35S 9W



Actual Bottom-Hole Location of Lori 2-2H  
Barber County, Kansas  
T&R: 35S 10W  
Section: 1, 1461' FEL & 310' FNL  
Long/Lat: -98.352494 37.035213  
1 in = 929 ft



● Actual BH Location

\* SandRidge Wells

--- Perf

□ Sections

Draftsman:

Aaron Birk

Draft Date: 8/1/2012

Drawing Name/Number:

Addendum\_Lori 2-2H.mxd

Coordinate System:

NAD 1927 State Plane  
Kansas South FIPS: 1502