



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: _____



1081458

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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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 32845
LOCATION Ottawa KS.
FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/8/11	1564	Trent Burkdoll #103	NE 13	18	20	FR
CUSTOMER B. G. S Inc.			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 3739 Ellis Rd			506 FREMAD Safety Mfg			
CITY STATE ZIP CODE Rantoul KS 66079			368 KENHAM 7#			
			548 GARMOD GYM			
			300			

JOB TYPE Log HOLE SIZE 6 3/4 HOLE DEPTH 782' CASING SIZE & WEIGHT 4 1/2
CASING DEPTH 566' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 4 1/2" Plug
DISPLACEMENT 12.16 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.13 PM

REMARKS: Establish pump rate. Mix Pump 100# Premium Gel Flush.
Mix Pump 8 BBL Teletank dye. Mix Pump 95 sls 50/50
por Mix Cement 29. Gel 1/2# Pheno Seal/sls. Flush pump & lines
clean. Displace 4 1/2" Rubber plug to casing TDW/12.16 BBL Fresh
water. Pressure to 700# PSI. Release pressure to set float
valve. Shut in casing.

Town Oil Co.
Rig Supplied Water
Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975 ⁰⁰
5406	15 mi	MILEAGE		60 ⁰⁰
5402	766	Casing footage		N/C
5407	Minimum	Ton Miles		330 ⁰⁰
1124	95 sls	50/50 Por Mix Cement		992 ²⁵
1118B	260#	Premium Gel		52 ¹⁰
1107A	48#	Pheno Seal		58 ⁵⁰
4404	1	4 1/2" Rubber plug		42 ¹⁰
			7.8%	SALES TAX 89 ³⁴
				ESTIMATED TOTAL 2599 ⁶⁵

241238

AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

T-103

Thickness of Strata	Formation	Total Depth	Remarks
7	soil & clay	7	
2	Lime	9	
3	shale	12	
11	Lime	23	
8	shale	31	
22	Lime	53	
18	Shale	71	
4	lime	75	
13	shale	88	
30	Lime	118	
78	shale	196	
22	Lime	218	
21	Shale	239	
21	sandy shale	260 260	iron w/ lime streaks
5	red limestone	265	
15	shale	280	grn
17	lime	297	Drum
10	Shale	307	
26	Lime	333	Winderset
8	shale & slate	341	
24	Lime	365	Bethany Falls
4	shale & slate	369	
4	lime	373	K.C.
3	shale & slate	376	
4	Lime	380	Hecker
150	shale & slate	530	

530

T-103

Thickness of Strata	Formation	Total Depth	Remarks
5	Lime shells	535	stopped at 540
5	shale	540	pulled 7 1/2
14	Lime	554	
20	shale	574	
11	sand	585	grey no show
13	sandy shale	598	
2	coal	600	
5	shale	605	
10	Lime	615	
10	shale	625	
3	Lime	628	Bm
12	shale	640	
3	Lime	643	
11	sandy shale	654	
8	sandy Lime	662	Brown no show
7	sandy shale	669	w/ lime strata
3	sand	672	broken good odor & bleed
6	sand	678	solid good odor & bleed
2	sand	680	broken good bleed
8	sandy shale	688	slight bleed
41	sandy shale	729	grey no color or bleed
4	sand	733	broken slight show & bleed
7	sandy shale	740	
2	sand	742	broken good bleed & odor
3	sand	745	solid good bleed & odor
37	sandy shale	782	T.D.