



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: _____



1085883

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Lease Name: Remlinger/Gleue	Spud Date: 5- 14 2012	Surface Pipe Size: 7"	Depth: 44'6"	T.D. 1010
Operator: Ron-Bob Oil	Well # S60-17	Bit Diameter: 5 7/8"		
Footage taken	Sample type			
0_4	soil			
4_12	clay			
12_27	sand gravel			
27_106	shale			
106_173	lime			
173_270	shale			
270_276	lime			
276_304	shale			
304_375	lime			
375_405	shale			
405_407	lime			
407_430	shale			
430_496	lime			
496_505	shale			
505_532	lime			
532_538	shale			
538_582	lime			
582_722	shale			
722_727	lime			
727_748	shale			
748_758	lime			
758_893	shale			
893_896	lime			
896_937	shale			
937_938	lime			
938_947	shale			
947_948	lime			
948_951	oil sand			
951_957	good oil sand			
957_960	broken sand, free oil			
960_1010	shale			
	1010 TD			

Hurricane Services, Inc.
 3613 A Y Road
 Madison, KS 66860
 Office # 620-437-2661
 Brad Cell # 620-437-6765

Ticket Number 100081
 Location Madison
 Foreman Brad Butler

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
5-9-12		S-60 # 17		Woodson
Customer Ron & Bob Oil		Mailing Address	City	State Zip

Job Type: <u>Longstring</u>	Truck #	Driver
Hole Size: <u>5 7/8"</u>	<u>201</u>	<u>Kelly</u>
Hole Depth: <u>1010'</u>	<u>202</u>	<u>Jerry</u>
Bridge Plug:	<u>106</u>	<u>Jesus</u>
Packer:	<u>144 & 152</u>	<u>Cody</u>
Casing Size:	Displacement: <u>5.8 Bbls</u>	
Casing Weight:	Displacement PSI: <u>500</u>	
Tubing: <u>2 7/8" @ 1003'</u>	Cement Left in Casing:	
PBTD:		

Quantity Or Units	Description of Services or Product	Pump charge	
<u>30</u>	Mileage	\$3.25/Mile	<u>790.00</u>
<u>105 SACKS</u>	<u>QuickSet cement</u>	<u>17.25</u>	<u>1,811.25</u>
<u>200 lbs</u>	<u>Gel > Flush Ahead</u>	<u>.30</u>	<u>60.00</u>
<u>2 1/2 Hrs</u>	<u>water Truck</u>	<u>84.00</u>	<u>210.00</u>
<u>3 Hrs</u>	<u>water Truck</u>	<u>84.00</u>	<u>252.00</u>
<u>6 Tons</u>	<u>Bulk Truck > minimum charge</u>	\$1.15/Mile	<u>250.00</u>
<u>2</u>	<u>Plugs 2 7/8" Top Rubber</u>	<u>25.00</u>	<u>50.00</u>
	Subtotal		<u>3,520.75</u>
	Sales Tax		<u>140.25</u>
	Estimated Total		<u>3,661.00</u>

Remarks: Rig up to 2 7/8" Tubing, Break circulation with fresh water, 10 Bbl. Gel Flush, circulated Gel around to condition Hole. Mixed 105 sks. QuickSet cement. Shut down - wash out Pump & Lines
Release 2 Plugs, Displaced Plugs with 5 3/4 Bbls water. Final Pumping at 500 PSI
Bumped Plugs to 1200 PSI - close Tubing to with 1200 PSI
Good cement returns with 5 3/4 Bbl. Slurry

"Thank you"

witnessed by Bob
 Customer Signature

Hurricane Services, Inc.
 3613 A Y Road
 Madison, KS 66860
 620-437-2661

Ticket Number 5225
 Location _____
 Foreman 327L #390

Acid
 Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
5/22/12		SAFELIGHT 60 #17		LD
Customer Ron & Bob		Mailing Address	City	State KS
			Zip	

Well Data		Truck #	Driver	Truck #	Driver
Casing Size 2 7/8	Total Depth 1000	303/320	JP		
Casing Weight	Plug Depth	143/151	JESUS		
Tubing Size	Packer Depth	144/152	DELBERT		
Tubing Weight	Open Hole	141/311	COBY		
Perfs 948-960		104	DANNY		
Break PSI 1400	Max PSI 1400	251	JUSTIN		
Treat PSI 600-650	ISIP 350				
Quantity	Acid	Additives Used	Charge		
1	303	Pump Charge		8.75	00
100	15%	Acid with inhibitor		195	00
		Mud Acid			
1/4		NE-320		5	98
		FSW-4100			
		Iron Stay			
5		Bacicide BACHSOLLE		112	50
		Clay Stay			
6		KCL		157	00
3		Biocide		114	00
15		Gel		417	00
1/2		Breaker		81	00
5000		Ball Sealers CITY WATER		65	00
1	141/311	Ball Gun SAND DEL		150	00
13	303	Pump truck Mileage		42	25
1	320	Acid Transport		N/C	
1	310	Acid Spotter		300	00
13	390	Pickup Mileage		19	50
2	104	80 Vac		N/C	
2	144/143	Transport		420	00
10		20/40 SANDS		300	00
30		12/20 SANDS		960	00
				Total	4215 05

Remarks: SPOT 100 GAL 15%. TEST LINE TO 3000. LOADS AND BREAK EST RATE 10APM @ 600. PUMP 10 GAL SPACER 10 SKS 20/40 AND 30 SKS 12/20 PSE UP 650 FLUSH 5 OVER ISIP 350 135 TOTAL FLUID.