



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: _____



1085899

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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Lease Name: Remlinger/Gleue Spud Date: 4-25-12 Surface Pipe Size: 7" Depth: 44'6" T.D. 1010
 Operator: Ron Bob Well # S60-19 Bit Diameter: 5 7/8"

Footage taken	Sample type
0_4	soil
4_12	sandy clay
12_26	sandy gravel
26_106	shale
106_170	lime
170_258	shale
258_270	lime
270_283	shale
283_294	lime
294_305	shale
305_371	lime
371_397	white lime
397_399	lime
399_427	shale
427_518	lime
518_524	shale
524_529	lime
529_532	shale
532_549	lime
549_564	shale
564_568	lime
568_690	shale
690_695	lime
695_722	shale
722_728	lime
728_742	shale
742_751	lime
751_766	shale
766_770	lime
770_811	shale
811_813	lime
813_824	shale
824_833	lime
833_840	shale
840_842	lime
842_849	shale
849_853	lime
853_867	shale
867_873	lime
873_890	shale
890_893	lime
893_904	shale
904_909	lime
909_941	shale
941_942	1st cap
942_945	shale
945_946	2nd cap
946_949	mostly shale, free oil
949_958	broken sand, free oil
958_961	dark sand soft with oil
961_965	oil odor
965_970	mostly light shale
970_1010	shale

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

Ticket Number 100076
 Location Madison
 Foreman Brad Butler

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
4-27-12		S-60 # 19		Woodson
Customer		Mailing Address	City	State Zip
Row & Bob Oil				

Job Type:	Longstring	Truck #	Driver
Hole Size: 5 7/8"	Casing Size:	201	Kelly
Hole Depth:	Casing Weight:	202	Jerly
Bridge Plug:	Tubing: 2 7/8" at 1001'	105	Cody
Packer:	PBTD: 1001'	143-151	Mark

Quantity Or Units	Description of Services or Product	Pump charge	
30	Mileage	\$3.25/Mile	790.00 97.50
107 SACKS	Quick Set cement	17.25	1845.75
200 lbs.	Gel > Flush Ahead	.30	60.00
2 1/2 Hrs.	water Truck	84.00	210.00
3 Hrs.	water Truck	84.00	252.00
6 Tons	Bulk Truck > minimum charge	\$1.15/Mile	250.00
2	Plugs 2 7/8" Top Rubber	25.00	50.00
		Subtotal	3555.25
		Sales Tax	142.77
		Estimated Total	3698.02

Remarks: Rig up to 2 7/8" Tubing, Break circulation with fresh water, 10 Bbl Gel Flush, circulated Gel around to condition hole, Mixed 107sks Quick Set cement, shutdown - washout Pump & lines
 Release 2-Plugs - Displaced Plugs with 5 3/4 Bbls water. Final Pumpage 500 PSI
 Bumped Plugs to 1100 PSI - close Tubing in with 1100 PSI
 Good cement retains with 5 1/2 Bbl slurry

"Thank you"

Witnessed by Bob
 Customer Signature

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

Ticket Number 5231

Location _____

Foreman Jul 7h

Acid
 Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
5/24/12		SAFELIGHT 60 # 19		WO
Customer		Mailing Address	City	State Zip
Row 4 BOB OEL				KS

Well Data		Truck #	Driver	Truck #	Driver
Casing Size 2 7/8	Total Depth 1000	303/320	JP		
Casing Weight	Plug Depth	143/151	Jul		
Tubing Size	Packer Depth	104	DANNY		
Tubing Weight	Open Hole	390/310	JUSTIN		
Perfs 948-960		141/311	CODY		
Break PSI 1450	Max PSI 1450				
Treat PSI 750-950	ISIP 400				

Quantity	Acid	Additives Used	Charge
1	303	Pump Charge	975 ⁰⁰
100	15%	Acid with inhibitor	195 ⁰⁰
		Mud Acid	
1/4		NE-320	5 ⁹⁸
		FSW-4100	
		Iron Stay	
5		Baehcide BACHSOLU	112 ⁵⁰
		Clay Stay	
6		KCL	157 ⁸⁰
3		Biocide	114 ⁵⁰
15		Gel	417 ⁰⁰
1/2		Breaker	81 ⁰⁰
		Ball Sealers	
1	141/311	Ball Gun SAND OEL	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	168 ⁰⁰
2	143/151	Transport	210 ⁰⁰
10 SKS		20/40 SAND	300 ⁰⁰
30 SKS		12/20 SAND	960 ⁰⁰
			Total 4208 ⁰³

Remarks: SPOT 100 GAL 15%. TEST LINE 3000. LOAD & BREAK EST RATE 100PM @ 750 PUMP 100BL SPACER 10SKS 20/40 SAND 30 SKS 12/20 SAND UP 950 FLUID SURFACE ISIP 400 135 GAL TOTAL FLUID.