



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



1087081

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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<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 (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**CEMENT FIELD TICKET AND TREATMENT REPORT**

Customer	Denman oil	State, County	Chautauqua , Kansas	Cement Type	CLASS A
Job Type	longstring	Section		Excess (%)	30
Customer Acct #		TWP		Density	13.7
Well No.	Dunham-Lemmon5-1	RGE		Water Required	
Mailing Address		Formation		Yeild	1.75
City & State		Hole Size	6 3/4	Slurry Weight	
Zip Code		Hole Depth	1215	Slurry Volume	
Contact		Casing Size	4 1/2INCH,	Displacement	19
Email		Casing Depth	1200	Displacement PSI	
Cell		Drill Pipe		MIX PSI	
Dispatch Location	BARTLESVILLE	Tubing		Rate	
<b>Code</b>	<b>Cement Pump Charges and Mileage</b>	<b>Quantity</b>	<b>Unit</b>	<b>Price per Unit</b>	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	45	PER MILE	\$4.00	\$ 180.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
5402	FOOTAGE	1,200	PER FOOT	0.22	\$ 264.00
				<b>EQUIPMENT TOTAL</b>	<b>\$ 1,824.00</b>
<b>Cement, Chemicals and Water</b>					
1126A	THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CHLORIDE)	130	0	\$19.20	\$ 2,496.00
1107A	PHENOSEAL	40	0	\$1.29	\$ 51.60
1110A	KOL SEAL (50 # SK)	650	0	\$0.46	\$ 299.00
1118B	PREMIUM GEL/BENTONITE (50#)	300	0	\$0.21	\$ 63.00
1123	CITY WATER (PER 1000 GAL)	5	0	\$16.50	\$ 82.50
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
				<b>CHEMICAL TOTAL</b>	<b>\$ 2,992.10</b>
<b>Water Transport</b>					
5501C	WATER TRANSPORT (CEMENT)	3	ATER TRANSPORT (CEME	\$112.00	\$ 336.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
				<b>TRANSPORT TOTAL</b>	<b>\$ 336.00</b>
<b>Cement Floating Equipment (TAXABLE)</b>					
<b>Cement Basket</b>					
0			0	\$0.00	\$ -
<b>Centralizer</b>					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>Float Shoe</b>					
0			0	\$0.00	\$ -
<b>Float Collars</b>					
0			0	\$0.00	\$ -
<b>Guide Shoes</b>					
0			0	\$0.00	\$ -
<b>Baffle and Flapper Plates</b>					
0			0	\$0.00	\$ -
<b>Packer Shoes</b>					
0			0	\$0.00	\$ -
<b>DV Tools</b>					
0			0	\$0.00	\$ -
<b>Ball Valves, Swedges, Clamps, Misc.</b>					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>Plugs and Ball Sealers</b>					
4404	4' 1/2" RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
<b>Downhole Tools</b>					
0			0	\$0.00	\$ -
				<b>CEMENT FLOATING EQUIPMENT TOTAL</b>	<b>\$ 45.00</b>
<b>TRUCK#</b>	<b>DRIVER NAME</b>			<b>SUB TOTAL</b>	<b>\$ 5,197.10</b>
492	jake			8.30% <b>SALES TAX</b>	<b>\$ 252.08</b>
551	james b			<b>TOTAL</b>	<b>\$ 5,449.18</b>
numley				10% <b>(-DISCOUNT)</b>	<b>\$ 544.92</b>
				<b>DISCOUNTED TOTAL</b>	<b>\$ 4,904.26</b>

AUTHORIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

TITLE \_\_\_\_\_  
FOREMAN \_\_\_\_\_

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.





# Invoice/Bill of Lading

EMERGENCY 24 HOUR RESPONSE  
1-800-535-5053

PO Box 542  
Winfield, KS 67156  
Ph: 620-221-7524 Fax: 620-221-7514

Date	Invoice#
6/29/2012	9088

<b>Bill To</b>
John M. Denman Oil Company, Inc. 202 S. Chautauqua Sedan, KS 67361

19-010

Lease/Well Name: **Dunham Lemmon S-1**

Terms	Due Date	P.O. #	Origin	Ship Date	Truck #	Driver	County
Net 30	7/29/2012		Winfield, KS	6/27/2012	701	Derek	Chautauqua
No of Package	HM	Item Code	Description	Total Weight	Quantity (Gallons)	Unit Price	Amount
1 cargo tank	X	HCl	UN1789. Hydrochloric acid solution, 8, PG II		250	1.95	487.50
		BallGun	Ball Injector Charge			125.00	125.00
		PerfBalls	Perf Balls	40	40	1.50	60.00
		SN-2040	Chemicals. NOS. PG III. (Not Regulated). Frac Sand - 20/40	5,000	5,000	0.28	1,400.00
		SN-1220	Chemicals. NOS. PG III. (Not Regulated). Frac Sand - 12/20	200	200	0.47	94.00
		WGA-D	Chemical. NOS. PGIII. (Not Regulated). Frac Gel with Breaker	150	150	8.75	1,312.50
		FracTruckLg Miles	Frac Truck Charge over 3000# Miles One Way			650.00	650.00
		Sndtrk Miles	Sand Truck & Trailer - #705 Miles One Way			3.00	3.00
		WaterChg	Water Haul Charge			450.00	450.00
						3.00	3.00
						1,035.00	1,035.00

AWK  
7-9-12

15% NE-FE Acid		<b>Subtotal</b>	\$5,620.00
Thank you for your business!	Customer Representative	Date	
<small> <b>LIMITATION OF LIABILITY</b>            Seller shall not be liable for, and buyer assumes responsibility for all personal injuries and property damages resulting from the handling, possession or use of the goods after delivery to buyer. In no event shall seller's liability exceed the purchase price of the products or services that are the subject of any claims made by buyer. In no event shall buyer be entitled to incidental or consequential damages. Buyer further agrees to indemnify and hold seller harmless from all claims, losses or damages attributable to pollution or contamination and cost of control or removal thereof, alleged to have been caused by materials sold to buyer hereunder.         </small>		<b>Sales Tax (8.3%)</b>	\$0.00
		<b>Total</b>	\$5,620.00

1 1/2% Interest per month charged on all past due accounts

