



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



1095005

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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## DRILL LOG

Operator License# \_\_\_\_\_

API 15-121-29225-00-00

Operator \_\_\_\_\_

Lease Name ABC

Address \_\_\_\_\_

Well # 30

Contractor JTC Oil, Inc.

Spud Date 8/18/12 Cement 8/28/12

Contractor License \_\_32834  
of \_\_\_\_\_

Location \_\_\_\_\_

T.D. 418 T.D. of Pipe 396  
\_\_\_\_\_

\_\_\_\_\_ feet from

Surf. Pipe Size 6.5 Depth 20

\_\_\_\_\_ feet from \_\_\_\_\_

Kind of Well \_\_\_\_\_

County Miami

Thickness	Strata	From	To	Thickness	Strata	From	To
20	soil/clay	0	20	1	shale	115	116
2	shale	20	22	5	lime	116	121
20	lime	22	42	9	shale	121	130
7	shale	42	44	28	lime	130	158
1	lime	44	45	7	black shale	158	165
6	shale	45	51	23	lime	165	188
3	lime	51	54	3	black shale	188	191
9	shale	54	65	5	lime	191	196
5	lime	65	70	1	shale	196	197
21	shale	70	91	7	lime	197	204

<b>14</b>	<b>lime</b>	<b>91</b>	<b>105</b>	<b>124</b>	<b>shale</b>	<b>204</b>	<b>328</b>
				<b>5</b>	<b>lime</b>	<b>328</b>	<b>333</b>
				<b>3</b>	<b>shale</b>	<b>333</b>	<b>336</b>
				<b>7</b>	<b>red bed</b>	<b>336</b>	<b>343</b>
				<b>5</b>	<b>lime</b>	<b>343</b>	<b>348</b>
				<b>2</b>	<b>little sand</b>	<b>348</b>	<b>350</b>
				<b>2</b>	<b>better</b>	<b>350</b>	<b>352</b>
				<b>2</b>	<b>good</b>	<b>352</b>	<b>354</b>
				<b>2</b>	<b>broken up</b>	<b>354</b>	<b>356</b>
				<b>2</b>	<b>good</b>	<b>356</b>	<b>358</b>
				<b>2</b>	<b>good</b>	<b>358</b>	<b>360</b>
				<b>2</b>	<b>vgood</b>	<b>360</b>	<b>362</b>
				<b>2</b>	<b>vgood</b>	<b>362</b>	<b>364</b>
				<b>2</b>	<b>vgood</b>	<b>364</b>	<b>366</b>
				<b>2</b>	<b>vgood</b>	<b>366</b>	<b>368</b>
				<b>2</b>	<b>little</b>	<b>368</b>	<b>370</b>
				<b>8</b>	<b>lime</b>	<b>370</b>	<b>376</b>
				<b>2</b>	<b>shale</b>	<b>378</b>	<b>380</b>
				<b>10</b>	<b>lime</b>	<b>380</b>	<b>390</b>
				<b>28</b>	<b>shale</b>	<b>390</b>	<b>418</b>

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**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 39556  
LOCATION Ottawa KS  
FOREMAN Fred Maden

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
8/15/12	4015	ABC # P-30	SW 22	17	20	MI
CUSTOMER						
JTC Oil Inc						
MAILING ADDRESS						
35688 Plum Creek Rd						
CITY						
Ottawa		STATE	KS	ZIP CODE	66064	
TRUCK #				DRIVER		
506				Fred Mad		Safety Mtg
495				Har Ber		HB
637				Tom Mad		JM
548				Mik Hen		MH

JOB TYPE Long string HOLE SIZE 6" HOLE DEPTH 418 CASING SIZE & WEIGHT 2 3/8 EUE  
CASING DEPTH 396' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2' Plug  
DISPLACEMENT 2.3 BB' DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 43 PM

REMARKS: check casing depth w/ wireline. Establish pump rate. Mix + pump 100# Cool Flush. Mix + Pump 5ks DWC Cement. Cement to surface. Flush pump + lines clean. Displace 2 1/2' Rubber plug to casing TD. Pressure to 500# PSI. Release pressure to get float valve. Shut in casing.

JTC Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030.00
5406	—	MILEAGE		N/C
5402	396	Casing footage		N/C
5407	1/3 minimum	Ten Miles	548	116.67
5502C	1 1/2 hr	FO BBL Vac Truck	637	135.00
1126	51 SKS	DWC Cement		258.00
1198	100#	Premium Gel		21.00
4402	1	2 1/2" Rubber plug		25.00
1107	13#	Flo Seal		30.55
			7.557	
		SALES TAX		78.40
		ESTIMATED TOTAL		2398.42

AUTHORIZATION Dina Dudder

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

252443