



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: _____



1095130

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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Form	ACO1 - Well Completion
Operator	Gore Oil Company
Well Name	Ross C 6
Doc ID	1095130

All Electric Logs Run

Compensated Density Neutron Log
Micro Log
Dual Induction Log
Dual Receiver Cement Bond Log

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Tops

Name	Top	Datum
Anhydrite	1418	+684
B/Anhydrite	1449	+653
Topeka	3045	-943
Heebner	3262	-1160
Toronto	3284	-1182
LKC	3306	-1204
BKC	3531	-1429
Conglomerate	3553	-1451
Simpson Shale	3630	-1528

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Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
4	3440-3446	1,000 gal 15% MCA	3440-3528
4	3462-3466	250 gal 15% MCA	3524-3528
4	3480-3484	1,000 gal 15% mud acid	3524-3528
4	3524-3528	1,000 gal 20% SGA	3554-3562
4	3554-3562	250 gal 15% mud acid	3554-3562
		2,250 gal acid	3440-3528

JOB LOG

SWIFT Services, Inc.

DATE 5-20-12 PAGE NO. 1

CUSTOMER Core Oil Co. WELL NO. #6 LEASE Ross C JOB TYPE Cement Lining TICKET NO. 21723

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								TD-3696'
	1400					15 1/2" A	5 1/2"	On location
	1415							Start 5 1/2" casing to 3691'
								55-18 1/2'-LD Baffle @ 3673'
								Insert Flat Shoe on Bottom - Auto fall
								Cent-1-3-5-7-9-11-13-53
								Inst Baskets For mud DP 14454
								P.C. collar #54 @ 1423'
								30 Roto-Scratchers
								Drop Kill up ball 60 lbs out.
	1530							Fin run casing
	1545							Ris cir / Rotate casing
	1615							Fin cir.
		6	12				300	Pump 520 gal Mud flush
		4	20				900	Pump 20851 KCL flush
			7					Plug Ptl 30 SKS
			5					Plug WH 15 SKS
		4 1/2					250	Start 155 SKS EA-2
			70				250	Down hole
							Val	Fin out.
								Wash out Pump Lines
								Drop L.O Plug
		7					300	Start Dsp1 - 87 1/2
	1700	5	87 1/2				500	Plug Down - Hold - Release & Hold.
							0	Wash up & Pack up
	1730							Job Complete

THANKS
 Dan Dave K
 J. Baker

JOB LOG

SWIFT Services, Inc.

DATE 5-23-12 PAGE NO. 1

CUSTOMER Core Oil Company

WELL NO. #6

LEASE Ross 'C'

JOB TYPE Cement Port Callar

TICKET NO. 21776

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1030							DN location w/ P.T
								Set up TRK (59 1/2 BBV)
	11:00							P.C @ 1423' - Ann Vol 44 Tbg Vol 5 1/2
						c	1000	Tst P.C closed - OK
		3	3				200	Tst. P.C open - inj rate 38BPM
							c	Hook to Tbg.
		3				300	c	Start HoD Ahead
		3	5 / 10					Start cut - Have Meel Returns
		3	100					Cut CIR @ 140 SKS @ 12 #/gal
		3	6					Mix 20 SKS @ 13 1/2 #/gal
		3	4 3/4					Fin cut - Disp 4 3/4 BBV HoD
						c	1000	Close PC & tst - OK
								Ris run 5 Jts - Rev-out 2 flgs
								Fin Rev-out - Ris pull tag.
								Wash up P.T.
	1215							Wait to Pump down ANN
	1330							Pump 15 SKS 15 #/gal cut Down ANN
								Wash up TRK & Packup
	1430							Job Complete
								Thanks Alan J. Brian T. J. Sisco

