



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: _____



1095293

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 248370

Invoice Date: 03/13/2012 Terms: 10/10/30, n/30

Page 1

J. B. D. % P. J. BUCK
P.O. BOX 68
SEDAN KS 67361
(620)725-3636

GLEASON JBD#1
34414
3-24-21
3-9-2012
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	150.00	17.6500	2647.50
1127A	65/35 POZ MIX	225.00	15.2000	3420.00
1118B	PREMIUM GEL / BENTONITE	1457.00	.2500	364.25
1102	CALCIUM CHLORIDE (50#)	423.00	.8900	376.47
1107	FLO-SEAL (25#)	56.00	2.8200	157.92
4132	CENTRALIZER 8 5/8"	2.00	82.0000	164.00
4411	8 5/8" RUBBER PLUG (TOP)	1.00	135.0000	135.00

Sublet Performed	Description	Total
9999-130	CASH DISCOUNT	-726.52
9999-130	CASH DISCOUNT	-323.36

Description	Hours	Unit Price	Total
399 CEMENT PUMP (SURFACE)	1.00	1085.00	1085.00
399 EQUIPMENT MILEAGE (ONE WAY)	65.00	5.00	325.00
528 TON MILEAGE DELIVERY	1092.00	1.67	1823.64

Amount Due 11040.05 if paid after 04/12/2012

Parts:	7265.14	Freight:	.00	Tax:	487.14	AR	9936.04
Labor:	.00	Misc:	.00	Total:	9936.04		
Sublt:	-1049.88	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914



CONSOLIDATED
Oil Well Services, LLC



TICKET NUMBER 34414
LOCATION Oakley, KS
FOREMAN Kelly Gabel

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE <u>3-9-12</u>	CUSTOMER # <u>4291</u>	WELL NAME & NUMBER <u>Gleason JBD #1</u>	SECTION <u>3</u>	TOWNSHIP <u>24</u>	RANGE <u>21</u>	COUNTY <u>KS</u> <u>Hodgeman</u>	
CUSTOMER <u>Soncs & Buck Development</u>		Mailing Address <u>Henston Storah E-torah 15 to Rog 1 1/2 E sinto</u>		TRUCK # <u>399</u>	DRIVER <u>Miless</u>	TRUCK # <u>528-727</u>	DRIVER <u>Carly Roats</u>
CITY	STATE	ZIP CODE					

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 634 CASING SIZE & WEIGHT 8 5/8 24 #
 CASING DEPTH 633 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 135-140 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 39 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting, Rigged up on southwind drilling rig # 20
hooked up to circulate, mixed 225 SKS 65/35 690 gel 390cc 1/4" Flo-seal,
tailed in with 150 SKS com 390cc & 290 gel, shut down, released plug,
displaced with 39 bbl water, shut in, washed out pumps & lines,
Rigged down & left location.

Cement did circulate

APPROX 11 bbl to pit
centralizer on 27 #3 1+4

Thank You
Kelly & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1085.00	1085.00
5406	65	MILEAGE	5.00	325.00
16045	150 SKS	Class A cement	17.65	2647.50
1127A	225 SKS	65/35 Pnz	15.30	3420.00
1118B	1457 #	Bentonite	.25	364.25
1102	423 #	Calcium chloride	.89	376.47
1107	56 #	Flo-seal	2.83	157.92
5407A	16.8	Ton mileage delivery	1.67	1823.64
4132	2	8 5/8 centralizer	82.00	164.00
4411	1	8 5/8 rubber Plug	135.00	135.00
				10487.75
				1049.81
				9448.90
				487.14
				9936.04

Ravin 3737
 1:00 PM 3-10-12
 AUTHORIZATION Tim Fabian TITLE _____ DATE 3-10-12

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.

