



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



1095732

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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**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

Phillips Exploration Company

**18-11s-23w-Trego**

1601 Sagebrush  
Wichita, KS. 67230

**Moden #2-18**

ATTN: Jlm Phillips

Job Ticket: **DST#: 3**

Test Start: 2012.05.29 @ 15:29:51

## GENERAL INFORMATION:

Formation: **J-K**

Deviated: No Whipstock: 0.00 ft (KB)

Time Tool Opened: 17:50:36

Time Test Ended: 22:36:06

Test Type: Conventional Bottom Hole (Reset)

Tester: Jason McLemore

Unit No: 54

**Interval: 3926.00 ft (KB) To 3970.00 ft (KB) (TVD)**

Total Depth: 3970.00 ft (KB) (TVD)

Hole Diameter: 7.80 inches Hole Condition: Good

Reference Elevations: 2396.00 ft (KB)

2391.00 ft (CF)

KB to GR/CF: 5.00 ft

**Serial #: 8366**

**Inside**

Press @ Run Depth: 20.75 psig @ 3963.00 ft (KB)

Start Date: 2012.05.29

End Date: 2012.05.29

Start Time: 15:29:53

End Time: 22:36:06

Capacity: 8000.00 psig

Last Calib.: 2012.05.29

Time On Btm: 2012.05.29 @ 17:50:21

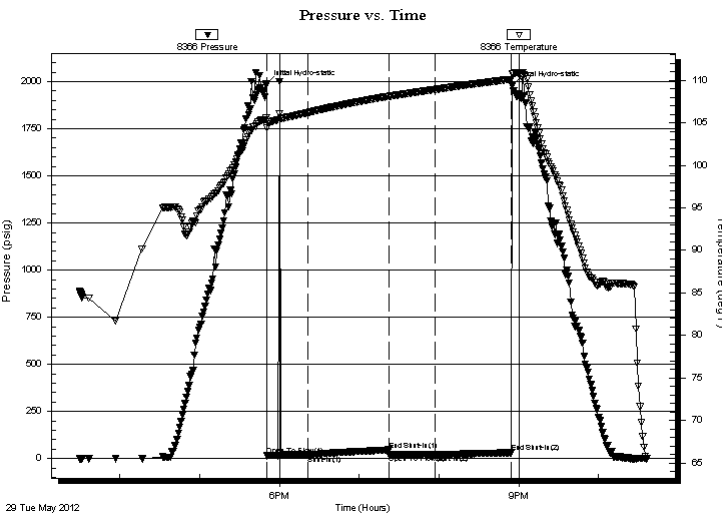
Time Off Btm: 2012.05.29 @ 20:55:06

**TEST COMMENT:** IFP-Surge Surge When Open, Dead in 5 Min. Flush Tool, Blow for 3 Min., Dead

ISI-Dead

FFP-Dead

FSI-Dead



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1986.47	105.58	Initial Hydro-static
1	14.68	104.38	Open To Flow (1)
31	19.52	106.20	Shut-In(1)
92	45.60	108.11	End Shut-In(1)
92	19.84	108.10	Open To Flow (2)
127	20.75	108.91	Shut-In(2)
184	30.55	110.12	End Shut-In(2)
185	1977.03	110.72	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
5.00	Drilling Mud	0.02

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

\* Recovery from multiple tests



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Phillips Exploration Company

**18-11s-23w-Trego**

1601 Sagebrush  
Wichita, KS. 67230

**Moden #2-18**

Job Ticket: **DST#: 3**

ATTN: Jlm Phillips

Test Start: 2012.05.29 @ 15:29:51

## Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 67.00 sec/qt	Cushion Volume: bbl		
Water Loss: 6.79 in <sup>3</sup>	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 1600.00 ppm			
Filter Cake: inches			

## Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	Drilling Mud	0.025

Total Length: 5.00 ft      Total Volume: 0.025 bbl

Num Fluid Samples: 0      Num Gas Bombs: 0      Serial #:

Laboratory Name:      Laboratory Location:

Recovery Comments:

Serial #: 8366

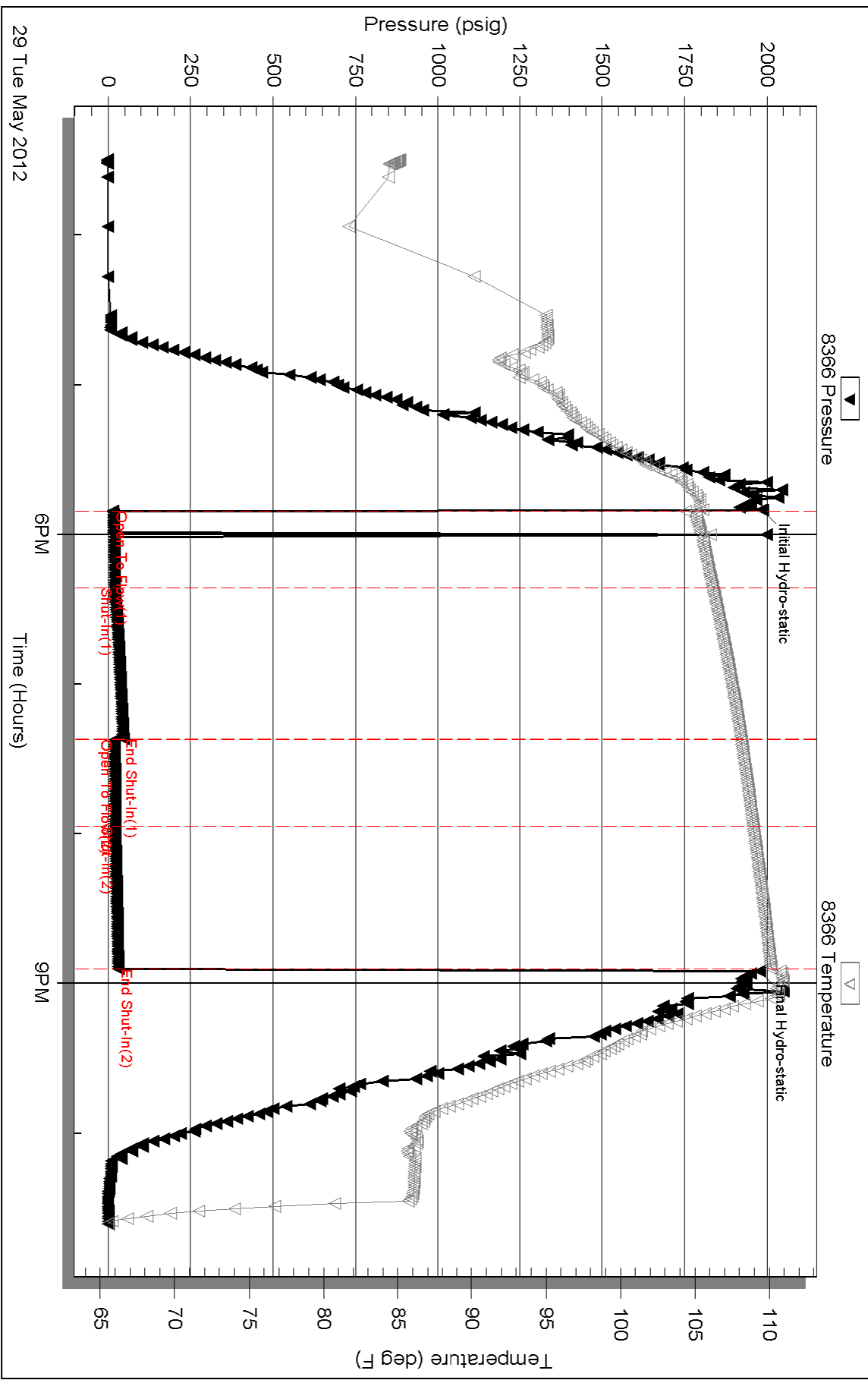
Inside

Phillips Exploration Company

Moden #2-18

DST Test Number: 3

### Pressure vs. Time



Triobite Testing, Inc

Ref. No:

Printed: 2012.05.30 @ 08:54:05

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 399

Date	5-24-12	Sec.	18	Twp.	11	Range	23	County	TREGO	State	KANSAS	On Location		Finish	9:15 PM	
Lease	MODERN	Well No.	2-18		Location WAKEENY DISTRICT - 2 1/2 W 1 N W INTO											
Contractor	MURKIN #16							Owner	PHILLIPS EXPLORATION							
Type Job	SURFACE							To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.								
Hole Size	12 1/4"		T.D.	209'												
Csg.	8 1/2"		Depth													
Tbg. Size			Depth													
Tool			Depth	15'		Street	11601 SAGEBRUSH									
Cement Left in Csg.			Shoe Joint													
Meas Line			Displace	12 1/2 BLS		City	WICHITA		State	KANSAS, 67230						
				The above was done to satisfaction and supervision of owner agent or contractor.												
				Cement Amount Ordered 150 com - 3cc - 2 1/2 GEL												

**EQUIPMENT**

Pumptrk #15	No.	Cementor	DOUG		Common	150	
Bulktrk #12	No.	Driver	NECK		Poz. Mix		
Bulktrk #14	No.	Driver	STEVE		Gel.	3	
		Driver	CESAO		Calcium	5	

**JOB SERVICES & REMARKS**

Remarks:	Hulls
Rat Hole	Salt
Mouse Hole	Flowseal
Centralizers	Kol-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38
	Sand
	Handling 158
	Mileage

CEMENT CIRCULATE &

**FLOAT EQUIPMENT**

	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down

THANK YOU

Pumptrk Charge SURFACE  
Mileage 99

X Signature Ag Oil

Tax	
Discount	
Total Charge	

of the

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 853

Date	5-30-12	Sec.	18	Twp.	11	Range	23	County	TREGO	State	KANSAS	On Location		Finish	4:30pm
Lease	MODEN		Well No.	#2-18		Location WAKEENEY NTO ERB-DW-1N-W INTO									
Contractor	MURETN RTG #110					Owner PHILLIPS EXPLORATION									
Type Job	ROTARY PLUG					To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.									
Hole Size	8 5/8"		T.D.												
Csg.	5 1/2"		Depth												
Tbg. Size			Depth												
Tool			Depth												
Cement Left in Csg.			Shoe Joint		The above was done to satisfaction and supervision of owner agent or contractor.										
Meas Line			Displace		Cement Amount Ordered 220 @ 40 - 4% GEL										

EQUIPMENT					
Pumptrk #5	No.	Cementer Helper	BEET	Common	132
Bulktrk #8	No.	Driver	LEVY	Poz. Mix	88
Bulktrk P/U	No.	Driver	CISCO	Gel.	8

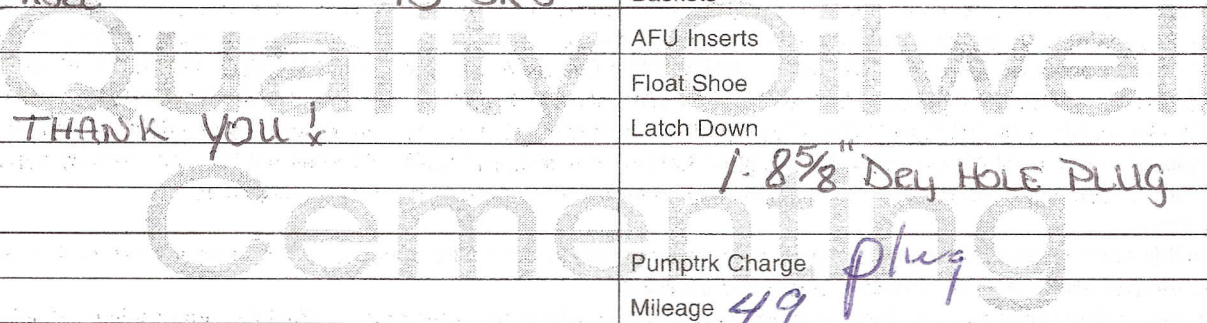
JOB SERVICES & REMARKS	
Remarks:	Hulls
Rat Hole 30 SKS	Salt
Mouse Hole 15 SKS	Flowseal 50A
Centralizers	Kol-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38

1st @ 1990'	25 SKS
2nd @ 1,040'	100 SKS
3rd @ 2100'	40 SKS
4th @ 40'	10 SKS
RAT HOLE	30 SKS
MOUSE HOLE	15 SKS

Handling	228
Mileage	

FLOAT EQUIPMENT	
Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	
1-8 5/8" Dry Hole Plug	
Pumptrk Charge	plug
Mileage	49

Signature <i>[Signature]</i>	Tax
	Discount
	Total Charge



THANK YOU!