



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



1095868

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
---	---

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
-----------------------------------	-----------	---------	-------------	---------------	---------

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: _____ _____
---	---	--



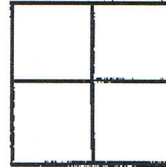
# Shields

Russell, Kansas

## WELL LOG

Operator: Weigel, Edward J. II and Tammy  
 Well: J.T. Weigel #1  
 Commenced: May 23, 2012  
 Completed: May 30, 2012  
 Contractor: Shields Drilling Co.

Well Description: 2,310' FNL, 2,345' FWL  
 NW/4 Sec. 6-13S-13W  
 Russell Co., KS



CASING RECORD		
Size	Run	Pulled
8 5/8"	208'	Cmtd. w/150 sax

Elevation: 1,777' K.B.

Treatment:

Production: D & A

Tops:

..... Figures Indicate Bottom of Formations .....

Sand & shale	635'	
Sand	675'	
Sand & redbed	789'	
Anhydrite	822'	
Redbed & shale	1,465'	
Shale	2,315'	
Shale & lime	2,785'	
Lime	3,290'	RTD

DAILY DRILLING REPORT

Kraftbilt 43-5 BOX 800, TULSA OK 74101  
1-800-331-7290

CONTRACTOR <b>Shields Drilling Co.</b>		DATE <b>5/30/12</b>	
COMPANY <b>Weigel E.J. II + T.</b>	LEASE <b>J.T. Weigel</b>	WELL NO. <b>1</b>	RIG NO. <b>2</b>
DISTRICT <b>#4</b>	COUNTY <b>Russell</b>	STATE <b>Ks</b>	D. P. STRING NO. <b></b>
		SIZE <b></b>	

FROM	TO	FORMATION	ROTARY SPEED	WEIGHT ON BIT	PUMP PRES.	NAME	HRS.
	25	sax @ 800'				DM John Kraft	8
	80	" " 400'				EM Tyler Plante	8
	40	" " 250'				H John McCune	8
SLOPE TEST		ACCIDENT: 71	40' w/wiper plug				
@ 30 FT.		" "	RH				
DEG. OFF		" "	MIT			DRLR Jay Eilers	8

BIT AND COREHEAD RECORD		MUD RECORD		TIME RECORD		DRILL STEM RECORD	
RUN NO.	225	WEIGHT	40	DRILLING	4%	SIZE D. P.	3
SIZE	Flow seal	WTR. LOSS-C.C.	Plug Down	CORING	@	SIZE COLL.	5
MAKE		FILTER CAKE		OTHER		JTS. D. P.	
SERIAL NO.	4:00 AM 3/30/12	PH.	Case Morris	REPAIRS		KELLY DOWN	
DEPTH IN	State Plugger	MTL. ADDED (REMARKS)	Well Cementing	TRIP		COLLARS	
HOURS RUN	Quality Oil			TOTAL			

REMARKS: 11:00 - 7:00 Cementing + Laying down D.P.

FROM	TO	FORMATION	ROTARY SPEED	WEIGHT ON BIT	PUMP PRES.	NAME	HRS.
						DM DANIEL Hook	8
						EM Robert Smith	8
						H Chester Dinkel	8
SLOPE TEST		ACCIDENT: -	Fuel - 18"				
@ FT.		" "	Reading - 13"				
DEG. OFF		" "	Used - 5" T-43"			DRLR George Begler	8

BIT AND COREHEAD RECORD		MUD RECORD		TIME RECORD		DRILL STEM RECORD	
RUN NO.		WEIGHT		DRILLING		SIZE D. P.	
SIZE		VISC.		CORING		SIZE COLL.	
MAKE		WTR. LOSS-C.C.		OTHER		JTS. D. P.	FT.
SERIAL NO.		FILTER CAKE		REPAIRS		KELLY DOWN	FT.
DEPTH IN		PH.		TRIP		COLLARS	FT.
HOURS RUN		MTL. ADDED (REMARKS)		TOTAL			FT.

REMARKS: 7:00 AM - 3:00 pm Finish JET And Tear down Rig, Work on Rig