



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: _____



1096414

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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Operator JOHN M DENMAN OIL CO		Well No. S-2	Lease LOWE	Loc. 1/4 1/4 1/4	Sec 10	Twp. 34	Rge. 12
County CHAUTAQUA		State KS	Type/Well 1038	Depth 1038	Hours	Date Started 9-18-12	Date Completed 9-19-12
Job No.	Casing Used 44' 8 5/8"	Bit No.	Type	From	To	Coring Record	
Driller	Cement Used	Bit No.	size 6 3/4"	From	To	Size	From
Driller	Rig No.						To
Driller	Hammer No.						% Rec.

Formation Record

From	To	Formation	From	To	Formation	From	To	Formation
0	13	OVERBURDEN	872	874	SHALE			
13	40	SANDY SHALE	874	875	LIME			
40	135	SHALE	875	890	SAND (OIL ODOR)			
135	165	SANDY SHALE	890	900	SANDY SHALE			
165	205	SAND	900	912	SAND (OIL ODOR)			
205	230	SHALE	912	932	SHALE			
230	242	LIMEY SHALE	932	967	LIME			
242	247	LIME	967	970	SHALE			
247	250	SAND	970	983	SAND (OIL ODOR)			
250	290	SHALE	983	1038	SHALE			
290	316	LIME			T.D. 1038'			
316	350	SHALE						
350	360	SANDY SHALE						
360	420	SAND SANDY SHALE						
420	521	SHALE						
521	522	COAL						
522	527	SHALE						
527	540	SANDY SHALE						
540	590	SAND (OIL ODOR)						
590	657	SHALE						
657	666	LIME						
666	668	SHALE						
668	670	SAND						
670	684	SHALE						
684	696	SAND						
696	697	COAL						
697	700	SANDY SHALE						
700	701	COAL						
701	708	SAND						
708	862	SHALE						
862	872	LIME						

9/20/2012

K253084



2550000278

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Denman Oil	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	longstring	Section		Excess (%)	30
Customer Acct #	2223	TWP		Density	13.7
Well No.	Low S2	RGE		Water Required	
Mailing Address		Formation		Yield	1.75
City & State		Hole Size	6 3/4	Slurry Weight	
Zip Code		Hole Depth	1040	Slurry Volume	
Contact		Casing Size	4 1/2 INCH,	Displacement	16.3
Email		Casing Depth	1028	Displacement PSI	
Cell		Drill Pipe		MIX PSI	
Dispatch Location	BARTLESVILLE	Tubing	2 3/8	Rate	
Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	40	PER MILE	\$4.00	\$ 160.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
5402	FOOTAGE	1,028	PER FOOT	0.22	\$ 226.16
EQUIPMENT TOTAL					\$ 1,766.16
Cement, Chemicals and Water					
1125A	THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CHLORIDE)	110	0	\$19.20	\$ 2,112.00
1107A	PHENOSEAL	40	0	\$1.29	\$ 51.60
1110A	KOL SEAL (50 # SK)	550	0	\$0.46	\$ 253.00
1119B	PREMIUM GELBENTONITE (50#)	200	0	\$0.21	\$ 42.00
1123	CITY WATER (PER 1000 GAL)	5	0	\$16.50	\$ 82.50
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
CHEMICAL TOTAL					\$ 2,541.10
Water Transport					
5501C	WATER TRANSPORT (CEMENT)	3	WATER TRANSPORT (CEME	\$112.00	\$ 336.00
0				\$0.00	\$ -
0				\$0.00	\$ -
TRANSPORT TOTAL					\$ 336.00
Cement Floating Equipment (TAXABLE)					
Cement Bucket					
0				\$0.00	\$ -
Centrifizer					
0				\$0.00	\$ -
Float Shoe					
0				\$0.00	\$ -
Float Collars					
0				\$0.00	\$ -
Guide Shoes					
0				\$0.00	\$ -
Baffle and Flapper Plates					
0				\$0.00	\$ -
Packer Shoes					
0				\$0.00	\$ -
DV Tools					
0				\$0.00	\$ -
Ball Valves, Sreedges, Clamps, Misc.					
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
Plugs and Ball Seelers					
4404	1/2 RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
0				\$0.00	\$ -
CEMENT FLOATING EQUIPMENT TOTAL					\$ 45.00
DRIVER NAME					452 Mike
SUB TOTAL					\$ 4,688.26
SALES TAX					\$ 214.65
TOTAL					\$ 4,902.91
(-DISCOUNT)					\$ 490.29
DISCOUNTED TOTAL					\$ 4,412.63

DRIVER NAME
 452 Mike
 551 James W
 AUTHORIZATION *Shelley D W S*
 DATE *9/20/12*

TITLE _____
 FOREMAN *Don Bull*

I ACKNOWLEDGE THAT THE PAYMENT TERMS, UNLESS SPECIFICALLY AMENDED BY 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.

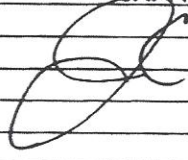
CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Denman Oil	State, County	Chautauqua , Kansas	Cement Type	CLASS A
Customer Acct #	longstring	Section	0	Excess (%)	30
Well No.	0	TWP	0	Density	13.7
Mailing Address	Lowe S2	RGE	0	Water Required	0
City & State	0	Formation	0	Yeild	1.75
Zip Code	0	Hole Size	6 3/4	Slurry Weight	0
Contact	0	Hole Depth	1040	Slurry Volume	0
Email	0	Casing Size	4 1/2INCH,	Displacement	16.3
Cell	0	Casing Depth	1028	Displacement PSI	0
Office	0	Drill Pipe	0	MIX PSI	0
Dispatch Location	BARTLESVILLE	Tubing	2 3/8	Rate	0

REMARKS

Ran 4sks of gel established curculation. Ran 110sks thickset cement class a. Shut down washed pump and lines clean. Dropped plug and displaced to bottom. Plug land and held. Knocked loose and washed up. Cement was curculated to surface.

SAFTY MEETING

 JW
LB

