



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: _____



1097755

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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HERB DEINES

CONSULTING GEOLOGIST

PH. 785-625-3380

HAYS, KS 67601

COMPANY: Tom Leisenbender Tom's Oil

WELL: Lechaert #1

FIELD: Lechaert

COUNTY: Ellis STATE: Kansas

LOCATION: 12 1/2' FSL + 381' FEL, SE 1/4

Logging by: SEC 6 TWP 15N RGE 18W

KB: 2032

DF: 2027

Log - Tech: 1 Lead - 1 Alum Guard Log

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3

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DATE	DEPTH	ACTIVITY	DATE	DEPTH	ACTIVITY
10-01-10	217	Run Speed, SAT, GP			
10-02-10	1264	DRG			
10-03-10	2261	DRG			
10-04-10	3171	DRG			
10-05-10	3362	DRG			
10-06-10	3682	RTD Log, RTD			

Drilling Time	RTD	RTD	RTD
2700			
3700			

Formation	Sample	Log	Datum	* Formation	Sample	Log	Datum	*
Anhydrite Top		1223	+809					
Anhydrite Base		1258	+774					
Unconformity		2779	-747					
Topeka lime		2822	-790					
Topeka		2793	-761					
Topeka		3294	-1241					
Lebanon Shale		3294	-1241					
LHC		3319	-1287					
BHC		3556	-1924					
Abackale		3462	-1630					
RTD	3682							
RTD		3681	-1449					

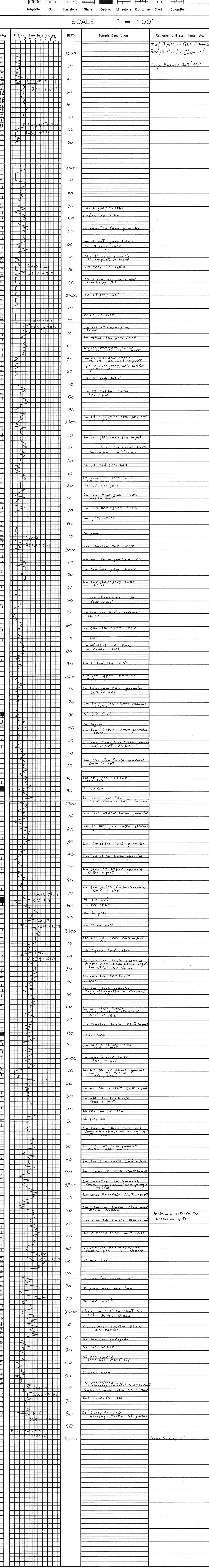
REMARKS	Recommendation To Plug & Abandon well due to low structural & lack of Reservoir development & shows of hydrocarbons
Handwritten notes	

Make & Type	Serial No.	Nozzles	Depth In	Depth Out	Hours

Formation	Sample	Log	Datum	* Formation	Sample	Log	Datum	*

LEGEND
Anhydrite
Salt
Sandstone
Shale
Carb sh
Limestone
Ool. Lime
Chert
Dolomite

SCALE " = 100'



Problem w Auto-dillan worked on system

Slope Survey 217 3/4'

ALLIED OIL & GAS SERVICES, LLC 053566

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Russell
East Bendys

DATE <u>9-30-12</u>	SEC. <u>27</u>	TWP. <u>14S</u>	RANGE <u>16W</u>	CALLED OUT	ON LOCATION	JOB START <u>9:30</u>	JOB FINISH <u>10:10PM</u>
LEASE <u>Rohleder</u>	WELL # <u>27-1</u>	LOCATION <u>walker 3 1/2 S 16 W 15</u>				COUNTY <u>ELLIS</u>	STATE <u>KS</u>
OLD OR (NEW) (Circle one)		<u>EXIST</u>				2.03 6.3 we	

CONTRACTOR Royal Drilling Rqpt 1 OWNER _____

TYPE OF JOB Roddy Plug

HOLE SIZE 12 1/4 T.D. _____

CASING SIZE 6 3/4 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 3425'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. #17

PERFS. _____

DISPLACEMENT Freshwater

EQUIPMENT _____

CEMENT	AMOUNT ORDERED	<u>210 gals 60% class A</u>
	<u>40% part 44 gals</u>	<u>144 gals</u>
COMMON	<u>126</u>	@ <u>17.80</u> <u>2255.40</u>
POZMIX	<u>84</u>	@ <u>9.35</u> <u>785.40</u>
GEL	<u>7</u>	@ <u>23.40</u> <u>163.80</u>
CHLORIDE		@ _____
ASC		@ _____
FEO-SEAL	<u>53#</u>	@ <u>2.97</u> <u>157.41</u>
		@ _____
		@ _____
		@ _____
		@ _____
		@ _____
		@ _____
HANDLING	<u>225.2</u>	@ <u>2.48</u> <u>558.49</u>
MILEAGE	<u>9.4 x 25</u>	<u>2.60</u> <u>611.00</u>
		TOTAL <u>4531.50</u>

PUMP TRUCK # 409 CEMENTER Dustin Chambers

HELPER Kurt Krupp

BULK TRUCK # 1161-000 DRIVER Tony Pfannenstiel

BULK TRUCK # _____ DRIVER _____

REMARKS:

Fill Hole with Rqpt mud

1 3425' - 25 gals

2 1220' - 80 gals

3 1120' - 90 gals

4 110' - 10 gals

5 RH - 30 gals

6 MH - 15 gals

plug form 10:15 pm

SERVICE

DEPTH OF JOB	<u>3425'</u>	
PUMP TRUCK CHARGE		<u>2600.47</u>
EXTRA FOOTAGE	@ _____	
MILEAGE	@ _____	
MANIFOLD	@ _____	
<u>HVM RT 50</u>	@ <u>7.90</u>	<u>385.00</u>
<u>LVM RT 50</u>	@ <u>4.40</u>	<u>220.00</u>
		TOTAL <u>3205.47</u>

CHARGE TO: Pfeifer Explorations

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>Wood Plug</u>	@ _____	<u>107.64</u>
	@ _____	
	@ _____	
	@ _____	
		TOTAL <u>107.64</u>

To: Allied Oil & Gas Services, LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME X Doug Budig

SIGNATURE X Doug Budig

Thank You!!

SALES TAX (If Any)	<u>494.21</u>
TOTAL CHARGES	<u>\$ 7844.61</u>
DISCOUNT	<u>1658.95</u> IF PAID IN 30 DAYS
	<u>\$ 6185.66</u>

New Customer
and credit gpp