



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
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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: \_\_\_\_\_



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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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10/8/2012

#2535a



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CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Denman Oil	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	4 1/2" Prod.	Section	10	Excess (%)	30%
Customer Acct #	2223	TWP	34S	Density	13.8
Well No.	Lowe S-4	RGE	12E	Water Required	8.42
Mailing Address		Formation		Yield	1.77
City & State		Casing Depth	1,020'	Sacks of Cement	110
Zip Code		Hole Depth	1,038'	Slurry Volume	35 bbl
Contact		Casing Size	4 1/2" 10.5#	Displacement	16.2 bbl
Email		Hole Size	6 3/4"	Displacement PSI	400#
Cell		Drill Pipe		MIX PSI	100#
Dispatch Location	BARTLESVILLE	Tubing		Rate	3.5 bpm
<b>Code</b>	<b>Cement Pump Charges and Mileage</b>	<b>Quantity</b>	<b>Unit</b>	<b>Price per Unit</b>	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	37	PER MILE	\$4.00	\$ 148.00
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	\$ -
0				\$0.00	\$ -
5402	FOOTAGE	1,020	PER FOOT	\$0.00	\$ -
				0.22	\$ 224.40
	<b>Cement, Chemicals and Water</b>			<b>EQUIPMENT TOTAL</b>	<b>\$ 1,752.40</b>
1126A	THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CHLORIDE)	110	0		
1107A	PHENOSEAL	80	0	\$19.20	\$ 2,112.00
1110A	KOL SEAL (50 # SK)	550	0	\$1.29	\$ 103.20
1123	CITY WATER (PER 1000 GAL)	5	0	\$0.46	\$ 253.00
0				\$16.50	\$ 82.50
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
				<b>CHEMICAL TOTAL</b>	<b>\$ 2,550.70</b>
5501C	WATER TRANSPORT (CEMENT)	3	WATER TRANSPORT (CEMENT)	\$112.00	\$ 336.00
0				\$0.00	\$ -
0				\$0.00	\$ -
	<b>Cement Floating Equipment (TAXABLE)</b>			<b>TRANSPORT TOTAL</b>	<b>\$ 336.00</b>
0	Cement Basket				
0	Centralizer		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Float Shoe		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Float Collars		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Guide Shoes		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Baffle and Flapper Plates		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Packer Shoes		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	DV Tools		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Ball Valves, Swedges, Clamps, Misc.		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Plugs and Ball Sealers		0	\$0.00	\$ -
4404	4 1/2" RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
0	Downhole Tools				
			0	\$0.00	\$ -
				<b>CEMENT FLOATING EQUIPMENT TOTAL</b>	<b>\$ 45.00</b>
				<b>SUB TOTAL</b>	<b>\$ 4,684.10</b>
			8.30%	<b>SALES TAX</b>	<b>\$ 215.24</b>
				<b>TOTAL</b>	<b>\$ 4,899.54</b>
			10%	<b>(DISCOUNT)</b>	<b>\$ 489.95</b>
				<b>DISCOUNTED TOTAL</b>	<b>\$ 4,409.59</b>

AUTHORIZATION Shelley W  
 DATE 10-8-12

TITLE \_\_\_\_\_  
 FOREMAN Chancey Williams

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.

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Denman Oil	State, County	Chautauqua , Kansas	Cement Type	CLASS A
Customer Acct #	4 1/2" Prod.	Section	10	Excess (%)	0.3
Well No.	0	TWP	34S	Density	13.8
Mailing Address	Lowe S-4	RGE	12E	Water Required	8.42
City & State	0	Formation	0	Yeild	1.77
Zip Code	0	Hole Size	1,020'	Slurry Weight	110
Contact	0	Hole Depth	1,038'	Slurry Volume	35 bbl
Email	0	Casing Size	4 1/2" 10.5#	Displacement	16.2 bbl
Cell	0	Casing Depth	6 3/4"	Displacement PSI	400#
Office	0	Drill Pipe	0	MIX PSI	100#
Dispatch Location	BARTLESVILLE	Tubing	0	Rate	3.5 bpm
REMARKS					

Arrive on Loc. Rig up. Safety Meeting. Pump 10 BBL of Gel Ahead, followed by 25 BBL of H2O til well circulated. Pumped 110 sks of Thick Set Cement, shut down washed pump and lines and dropped top rubber plug. Displaced 16.2 bbl. Landed plug at 1,100#. Float Held. Circulated 10 BBL of cement to pit.

SAFTY MEETING