



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



1098951

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Shaida, John H.
Well Name	Foster 2
Doc ID	1098951

All Electric Logs Run

Microresistivity
Dual Compensated Porosity
Cement Bond Log
BHC Sonic

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

Date	10-12-12	Sec.	12	Twp.	21	Range	16	County	Pawnee	State	Ks	On Location		Finish	6:15 AM
Lease	Foster	Well No.	2		Location		Pawnee Rock, Ks - 3 to 4W - 136 1/2 W								
Contractor	Royal	#2	Owner		K.N. Wilcox										
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.	960'		Charge To		John Sharda								
Csg.	8 5/8"	Depth	960'		Street										
Tbg. Size		Depth			City		State								
Tool		Depth			The above was done to satisfaction and supervision of owner agent or contractor.										
Cement Left in Csg.	25'	Shoe Joint	25'		Cement Amount Ordered		400 sy Common 2500								
Meas Line		Displace	59 1/2 Bcs		2 1/2 Gal 1/2 H Flo - seal										

**EQUIPMENT**

Pumptrk	5	No.	Cementer	Brett	Common
			Helper		
Bulktrk	12	No.	Driver	Lannie	Poz. Mix
			Driver		
Bulktrk	p.u.	No.	Driver	Rick	Gel.
			Driver		

**JOB SERVICES & REMARKS**

Remarks	Cement did Circulate	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
		Mileage

**FLOAT EQUIPMENT**

	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down
	1 - Baffle plate
	1 - Rubber plug
	Pumptrk Charge
	Mileage

X Signature *Long Buddy*

Tax  
Discount  
Total Charge

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

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

No. 0128

Cell 785-324-1041

Date	10-19-12	Sec	12	Twp.	21	Range	16	County	Butler	State	KS	On Location		Finish	4:30pm
Location: <i>13442nd St W</i>															
Lease	Well No. <i>7</i>							Owner							
Contractor								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.							
Type/Job								Charge To <i>John H. Smith</i>							
Hole Size	<i>7 7/8</i>		T.D.		<i>3825</i>		Street								
Csg.	<i>5/2 1411</i>		Depth		<i>3825</i>		City								
Tbg. Size			Depth				State								
Tool			Depth				The above was done to satisfaction and supervision of owner agent or contractor.								
Cement Left in Csg.	<i>2092</i>		Shoe Joint		<i>2098</i>		Cement Amount Ordered <i>2000 lbs 10% Silica 5% Alumina</i>								
Meas Line			Displace		<i>92 MBL</i>		<i>500 gal ml 2400 30/11</i>								
<b>EQUIPMENT</b>															
Pumptrk	No.	Cement Helper	Common												
Bulktrk	No.	Driver	Poz. Mix												
Bulktrk	No.	Driver	Gel.												
Bulktrk	No.	Driver	Calcium												
<b>JOB SERVICES &amp; REMARKS</b>															
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							
<i>5/2 1411 3825 3842</i> <i>100% Silica Alumina 2000 lbs</i> <i>Centralizer 5/2 1411 3825 3842</i> <i>Displace 92 MBL</i> <i>Rat Hole</i>															
<b>FLOAT EQUIPMENT</b>															
Guide Shoe <i>5/2</i>															
Centralizer <i>7</i>															
Baskets <i>3</i>															
AFU Inserts															
Float Shoe <i>1</i>															
Latch Down <i>1</i>															
<i>(18' Landing Joint)</i>															
Pumptrk Charge															
Mileage															
Tax															
Discount															
Total Charge															
X Signature <i>[Signature]</i>															



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

Shalda, John H.  
4126 N.Sweet Bay Cir.  
Wichita Ks.67226  
ATTN: Jeff Lawler

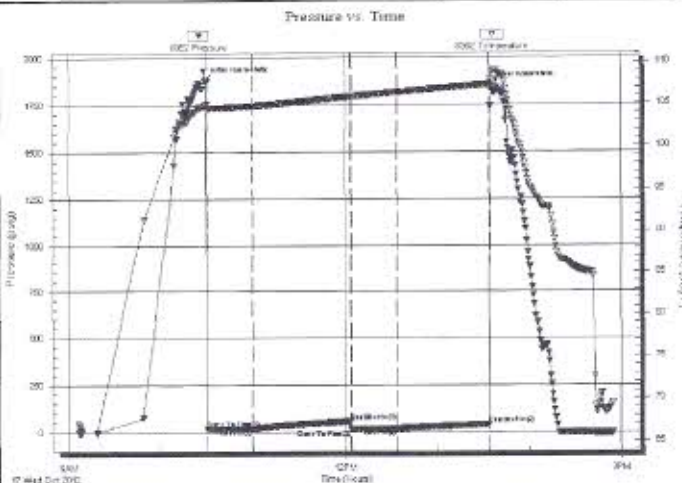
**12-21s-16w Pawnee Ks**  
**Foster#2**  
Job Ticket: 49618      DST#: 1  
Test Start: 2012.10.17 @ 09:06:38

## GENERAL INFORMATION:

Formation: **Viola /Simpson Sd.**  
Deviated: **No Whipstock:**      ft (KB)  
Time Tool Opened: **10:30:23**  
Time Test Ended: **14:55:08**  
Interval: **3708.00 ft (KB) To 3755.00 ft (KB) (TVD)**  
Total Depth: **3755.00 ft (KB) (TVD)**  
Hole Diameter: **7.88 inches** Hole Condition: **Fair**  
Test Type: **Conventional Bottom Hole (Initial)**  
Tester: **Gary Pevoteaux**  
Unit No: **56**  
Reference Elevations: **1968.00 ft (KB)**  
**1961.00 ft (CF)**  
KB to GR/CF: **7.00 ft**

**Serial #: 8352**      Inside  
Press@RunDepth: **20.34 psig @ 3709.00 ft (KB)**      Capacity: **8000.00 psig**  
Start Date: **2012.10.17**      End Date: **2012.10.17**      Last Calib.: **2012.10.17**  
Start Time: **09:06:38**      End Time: **14:55:08**      Time On Btm: **2012.10.17 @ 10:28:23**  
Time Off Btm: **2012.10.17 @ 13:35:08**

**TEST COMMENT:** IF:Weak blow . 1/2 - 3 1/2". Decreasing back to 1 1/2" after 30 mins.  
IS:No blow .  
FF:Weak blow . 1/2 - 2 1/2". Decreasing back to 1" after 30 mins.  
FS:No blow .



## PRESSURE SUMMARY

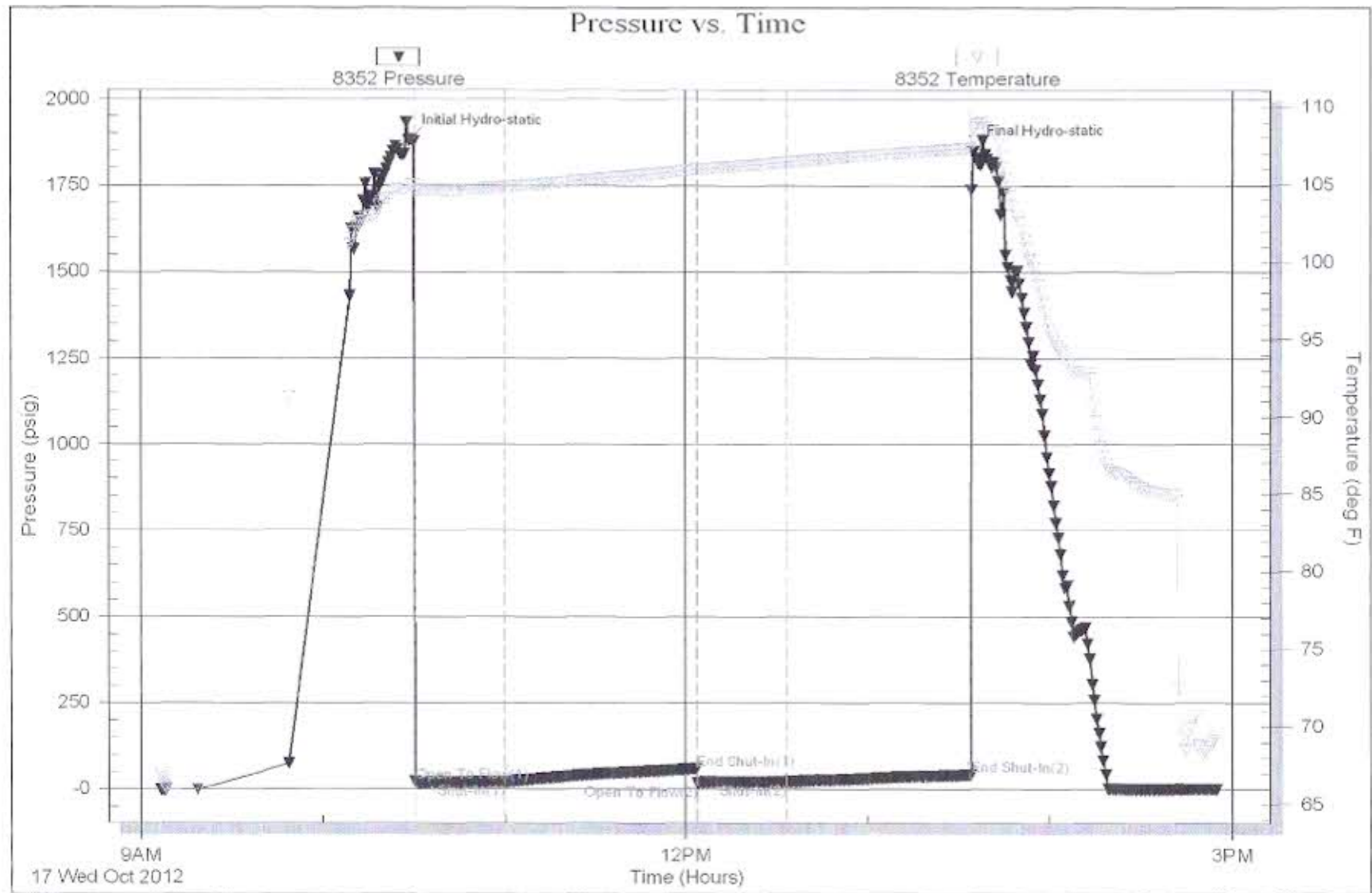
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1879.70	104.88	Initial Hydro-static
2	21.14	104.54	Open To Flow (1)
32	18.73	104.81	Shut-In(1)
96	58.13	105.94	End Shut-In(1)
96	14.78	105.92	Open To Flow (2)
126	20.34	106.42	Shut-In(2)
186	40.92	107.33	End Shut-In(2)
187	1848.13	108.63	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
0.00	115 ft.of GIP	0.00
6.00	Drig.mud	0.08

## Gas Rates

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





**TRILOBITE**  
TESTING, INC

# DRILL STEM TEST REPORT

Shaiba, John H.  
4126 N.Sweet Bay Cir.  
Wichita Ks.67226  
ATTN: Jeff Lawler

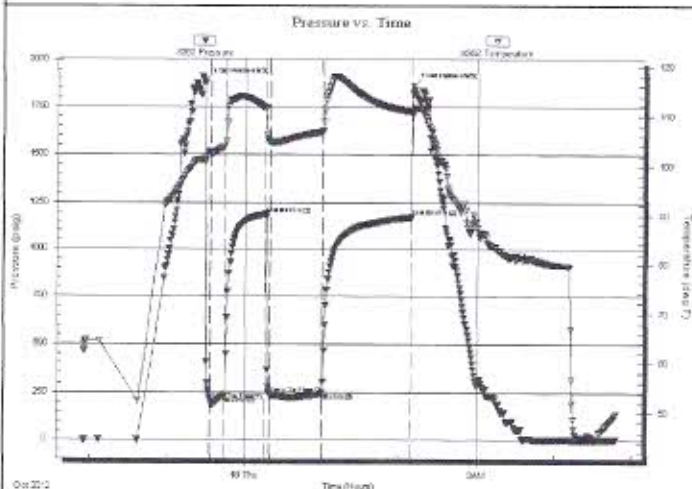
**12-21s-16w Pawnee Ks**  
**Foster#2**  
Job Ticket: 49619      **DST#: 2**  
Test Start: 2012.10.17 @ 21:55:01

## GENERAL INFORMATION:

Formation: **Arbuckle**  
Deviated: No Whipstock:                      ft (KB)  
Time Tool Opened: 23:33:16  
Time Test Ended: 04:47:46  
Interval: **3705.00 ft (KB) To 3775.00 ft (KB) (TVD)**  
Total Depth: **3775.00 ft (KB) (TVD)**  
Hole Diameter: **7.88 inches** Hole Condition: Fair  
Test Type: Conventional Bottom Hole (Reset)  
Tester: Gary Pevoteaux  
Unit No: 56  
Reference Elevations: 1968.00 ft (KB)  
1960.00 ft (CF)  
KB to GR/CF: 8.00 ft

**Serial #: 8352**      Inside  
Press@RunDepth: 246.00 psig @ 3706.00 ft (KB)      Capacity: 8000.00 psig  
Start Date: 2012.10.17      End Date: 2012.10.18      Last Calib.: 2012.10.18  
Start Time: 21:55:01      End Time: 04:47:46      Time On Btm: 2012.10.17 @ 23:28:01  
Time Off Btm: 2012.10.18 @ 02:10:01

**TEST COMMENT:** IF: Strong blow . GTS in 3 mins. (see gas flow report)  
IS: No blow .  
FF: Strong blow . (see gas flow report)  
FS: No blow .



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1882.93	101.32	Initial Hydro-static
6	201.90	102.66	Open To Flow (1)
17	227.83	103.87	Shut-In(1)
48	1187.01	111.50	End Shut-In(1)
51	239.69	104.75	Open To Flow (2)
92	246.00	106.89	Shut-In(2)
161	1172.76	110.93	End Shut-In(2)
162	1860.57	110.33	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
95.00	GCM/w few o specs 7%g 93% m	1.33
185.00	GOCM 34%g 16%o 50% m	2.60
185.00	CGO 48%g 52%o	2.60
125.00	SMC,GO 3% m 50% g 47% o	1.75

\* Recovery from multiple tests

## Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	0.38	62.00	279.87
Last Gas Rate	0.50	45.00	400.69
Max. Gas Rate	0.38	74.00	323.83



