



11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Tailwater, Inc.

Simons Bros. Farms 9-IW

API#15-003-25,593

December 3 - December 4, 2012

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
6	soil & clay	6
3	clay & gravel	9
69	shale	78
27	lime	105
62	shale	167
10	lime	177
7	shale	184
33	lime	217
9	shale	226
20	lime	246
3	shale	249
24	lime	273 base of the Kansas City
170	shale	443
3	lime	446
17	shale	463 oil show
6	lime	469
13	shale	482
4	oil sand	486 green, good bleeding
1	coal	487
29	shale	516
1	coal	517
7	shale	524
6	lime	530
15	shale	545
8	lime	553
35	shale	588
7	lime	595
29	shale	624
6	broken sand	630 brown & green, good bleeding
34	shale	664
1	lime & shells	665
6	oil sand	671 brown, good bleeding
4	shale	675
3	sand	678 black, no oil
117	shale	795
9	oil sand	804 brown, good bleeding
55	shale	859 TD

Drilled a 9 7/8" hole to 21.7'

Drilled a 5 5/8" hole to 859'

Set 21.7' of 7" surface casing cemented with 6 sacks of cement.

Set 848.7' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 35248

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/4/12	7806	Simon Bros #9-IW	NW 27	20	20	AN
CUSTOMER <u>Tailwater Inc.</u>						
MAILING ADDRESS <u>6421 Avondale Dr., Suite 212</u>						
CITY <u>Oklahoma City</u>		STATE <u>OK</u>	ZIP CODE <u>73116</u>			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			<u>481</u>	<u>Casken</u>	<u>✓ Safety Meeting</u>	
			<u>Lelco</u>	<u>Gartico</u>	<u>✓</u>	
			<u>510</u>	<u>Set Wc</u>	<u>✓</u>	
			<u>370</u>	<u>Wes Tra</u>	<u>✓</u>	

JOB TYPE overstring HOLE SIZE 5 5/8" HOLE DEPTH 859 CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 849 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 4.91 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 100# Premium Gel followed by 10 bbls fresh water, mixed & pumped 125 sks 50/50 Pozmix cement w/ 2% gel per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 4.91 bbls fresh water, pressured to 800 PSI, well held pressure for 30 min MIT, released pressure, shut in casing.

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE		1030.00	
5406	<u>on lease</u>	MILEAGE			
5402	<u>849'</u>	<u>casing footage</u>			
5407	<u>1/2 minimum</u>	<u>van mileage</u>		175.00	
5502C	<u>1.5 hrs</u>	<u>80 vac</u>		135.00	
1124	<u>125 sks</u>	<u>50/50 Pozmix cement</u>		1368.75	
11873	<u>310 #</u>	<u>Premium Gel</u>		65.10	
4402	<u>1</u>	<u>2 1/2" rubber plug</u>		28.00	
				SALES TAX	114.02
				ESTIMATED TOTAL	<u>2915.87</u>

completed

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____

I 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

255093