



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



1107261

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
---	---

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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
-----------------------------------	-----------	---------	-------------	---------------	---------

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> <input type="checkbox"/> Other (Specify) _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
---	---	--

Douglas County, KS  
 Well: Pearson 22  
 Lease Owner: R.T. Enterprises

Town Oilfield Service, Inc.  
 (913) 837-8400

Commenced Spudding:  
 12/13/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-21	Soil-Clay	21
50	Sand-Water	71
139	Shale	210
5	Lime	215
6	Sandy Shale	221
14	Lime	235
7	Shale	242
8	Lime	250
5	Shale	255
18	Shale	273
16	Shale	289
19	Sand and Sandy Shale	308
18	Lime	326
6	Sandy Shale	332
12	Sand and Sandy Shale	344
56	Shale	400
22	Lime	422
13	Shale	435
5	Shale	440
7	Lime	447
22	Shale	469
17	Lime	486
5	Shale	491
1	Lime	492
13	Shale	505
5	Lime	510
18	Lime	528
8	Shale	536
23	Lime	559
4	Shale	563
4	Lime	567
4	Shale	571
5	Lime	576
117	Shale	693
10	Sand	703
9	Sandy Shale	712
37	Shale	749
7	Lime	756
6	Shale	762
6	Lime	768





# Short Cuts

## TANK CAPACITY

BBLS. (42 gal.) equals  $D^2 \times .14 \times h$

D equals diameter in feet.

h equals height in feet.

## BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals  $BPH \times PSI \times .0004$

BPH - barrels per hour

PSI - pounds square inch

## TO FIGURE PUMP DRIVES

\* D - Diameter of Pump Sheave

\* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

\*C - Shaft Center Distance

D -  $RPM \times d$  over  $SPM \times R$

d -  $SPM \times R \times D$  over RPM

SPM -  $RPM \times D$  over  $R \times D$

R -  $RPM \times D$  over  $SPM \times D$

BELT LENGTH -  $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

\* Need these to figure belt length

TO FIGURE AMPS:  $\frac{WATTS}{VOLTS} = AMPS$

746 WATTS equal 1 HP

# Log Book

Well No. 22

Farm Pearson

KS Douglas  
(State) (County)

11 15 20  
(Section) (Township) (Range)

For R.T. Enterprises  
(Well Owner)

## Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400



Parson Farm: Douglas County  
KS State; Well No. 22

Elevation 1087

Commenced Spudding Dec 13 20 12

Finished Drilling Dec 17 20 12

Driller's Name Wesley Dollard

Driller's Name \_\_\_\_\_

Driller's Name \_\_\_\_\_

Tool Dresser's Name Ryan Ward

Tool Dresser's Name \_\_\_\_\_

Tool Dresser's Name \_\_\_\_\_

Contractor's Name TOS  
11 15 20

(Section) (Township) (Range)

Distance from S line, 2440 ft.

Distance from E line, 840 ft.

1 core  
17 hrs

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
921.8		Baffle			
953.3		Float			
					27/8

CASING AND TUBING RECORD

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_  
8" Set \_\_\_\_\_ 8" Pulled \_\_\_\_\_  
7 5/8" Set 90 \_\_\_\_\_ 6 1/4" Pulled \_\_\_\_\_  
4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_  
2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_

Thickness of Strata	Formation	Total Depth	Remarks
0-21	soil-clay	21	
50	sand-water	71	
139	shale	210	
5	lime	215	
6	sandy shale	221	
14	lime	235	
7	shale-slate	242	
8	lime	250	
5	shale	255	
18	shale & shells	273	
16	shale & redbed	289	
19	sand & sandy shale	308	no oil
18	lime & shells	326	
6	sandy shale	332	
12	sand & sandy shale	344	no oil
56	shale	400	
22	lime	422	
13	shale	435	
5	shale & lime	440	
7	lime	447	
22	shale	469	
17	lime	486	
5	shale	491	
1	lime	492	
13	shale	505	
5	lime	510	
18	lime	528	Oil - Heavy bleed



528

Thickness of Strata	Formation	Total Depth	Remarks
8	Shale	536	
23	Lime	559	
4	Shale - slate	563	
4	Lime	567	
4	Shale	571	
5	Lime	576	Hertha
117	Shale	693	
10	sand	703	slight show
9	sandy shale	712	
37	Shale	749	
7	Lime	756	
6	shale	762	
6	Lime	768	
5	Shale	773	
1	Lime	774	
22	shale & lime	796	
2	Lime	798	
17	shale	815	
3	Lime	818	
25	Shale	843	
1	Lime	844	
2	shale	846	
7	sand	853	no Oil
1	sand	854	broken
20	Core	874	
11	sand	885	solid - poor saturation
5	sand & sandy shale	890	broken - good Oil
14	sands	904	solid - good Oil
2	sandy lime	906	no Oil
74	shale	980	TD

COLE

Thickness of Strata	Formation	Total Depth	Remarks
		854	
6	sand & shale	860	broken 5% oil
14	sand	874	broken mostly solid



**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 39026  
LOCATION Ottawa  
FOREMAN Alan Mader

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-17-12		Pearson # 22	SE 11	15	20	DG
CUSTOMER <u>Ojen roc</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>120 Shoreline Drive</u>			516	AlcMad	Safety	Meat
CITY	STATE	ZIP CODE	368	ArMcD	AKM	
Louisburg	KS	66653	369	Der/Mas	JM	
JOB TYPE <u>long string</u> HOLE SIZE <u>5 5/8</u> HOLE DEPTH <u>980</u>			558	Bre Man	BM	

CASING DEPTH 953 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ CASING SIZE & WEIGHT 2 7/8  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ OTHER baffle 922  
DISPLACEMENT 33 DISPLACEMENT PSI 800 MIX PSI 200 CEMENT LEFT in CASING yes  
RATE 41 bpm

REMARKS: held meeting Established rate. Mixed + pumped 100# gel followed by 126 sk 50/50 cement plus 2% gel. Circulated cement. Flushed pump. pumped plus 70 baffle. Well held 800 PSI. Set float. Closed valve.

105 Wes

*Alan Mader*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		
5406	20	MILEAGE	368	1030.00
5402	953	Casing Postage	368	80.00
5407	1/2 min	ton miles		
5502C	1 1/2	30 Val	369	175.00
				135.00
1124	126	50/50 cement		1379.20
1118B	312#	gel		65.52
4402	1	2 1/2 plug		28.00

completed

Ravin 3737  
NO company rep  
AUTHORIZATION Jim DK'd TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
SALES TAX 107.54  
ESTIMATED TOTAL 3000.76

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.





**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 39055  
LOCATION Ottawa, KS  
FOREMAN Casey Kennedy

**FIELD TICKET & TREATMENT REPORT  
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/13/12		Pearson # 22	SE 11	15	20	DG
CUSTOMER Ojenroc						
MAILING ADDRESS 120 Shoreline Dr						
CITY Louisburg		STATE KS	ZIP CODE 66053			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			481	Cashen	✓	Safety Meeting
			6666	KeiCar	✓	
			548	Dan Det	✓	
			370	Jas Ric	✓	

JOB TYPE surface HOLE SIZE 10" HOLE DEPTH 90' CASING SIZE & WEIGHT 7", 20#  
 CASING DEPTH 90' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT In CASING 6'  
 DISPLACEMENT 3.4 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 44 sks  
50/50 Pozmix cement w/ 2% Premium Gel per sk, cement to surface,  
displaced cement w/ 3.4 bbls fresh water, shut in casing.

*(Handwritten signature)*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE		825.00
5406	20 mi	MILEAGE		80.00
5402	90'	casing footage		
5407	minimum	ton mileage		350.00
5502C	2.5 hrs	80 Vac		225.00
1124	44 sks	50/50 Pozmix cement		481.80
1118B	74 #	Premium Gel		15.54
<b>SCANNED</b>				
			7.3%	SALES TAX 36.31
				ESTIMATED TOTAL 2013.65

Ravin 3737

AUTHORIZATION No Co. Rep. on location 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