



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: _____



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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Smitherman, Leon C., Jr.
Well Name	WEBER A-3
Doc ID	1108497

All Electric Logs Run

Gama-neutron
Density
Induction
Sonic
Micro

GEOLOGICAL REPORT

Leon C. Smitherman, Jr.

Weber A #3

NE SE SW SW Section 19-T24S-R5E

Butler County, Kansas

COMMENCED: 10-22-12
 COMPLETED: 10-26-12
 CONTRACTOR: Gulick Drilling Company
 SIZE OF HOLE: 7 7/8"
 SURFACE PIPE: 8 5/8"
 CEMENTED WITH: N/A
 LONG STRING: 5 1/2"
 CEMENTED WITH: N/A
 R.T.D.: 2749'

STATUS: Oil
 A.P.I. #: 15-015-23957
 OPERATOR LIC.: 33025
 FIELD: Plum Grove East
 ELEVATION: 1449 K.B.
 LOGS: PIT CNT/LDT MLT CST
 MUD SYSTEM: Chemical
 OTHER:

William M. Stout
 Geologist

William M. Stout
 10-28-12

FORMATION TOPS

1441 G.L. 1449 K.B.

	Sample	Log
Cherokee	2502-1053	2500-1051
Ardmore	2540-1091	2536-1087
Mississippi	2566-1117	2566-1117
Mississippi Chert	2572-1123	2571-1122
Kinderhook	2701-1252	2699-1250
Total Depth	2749-1300	2749-1300

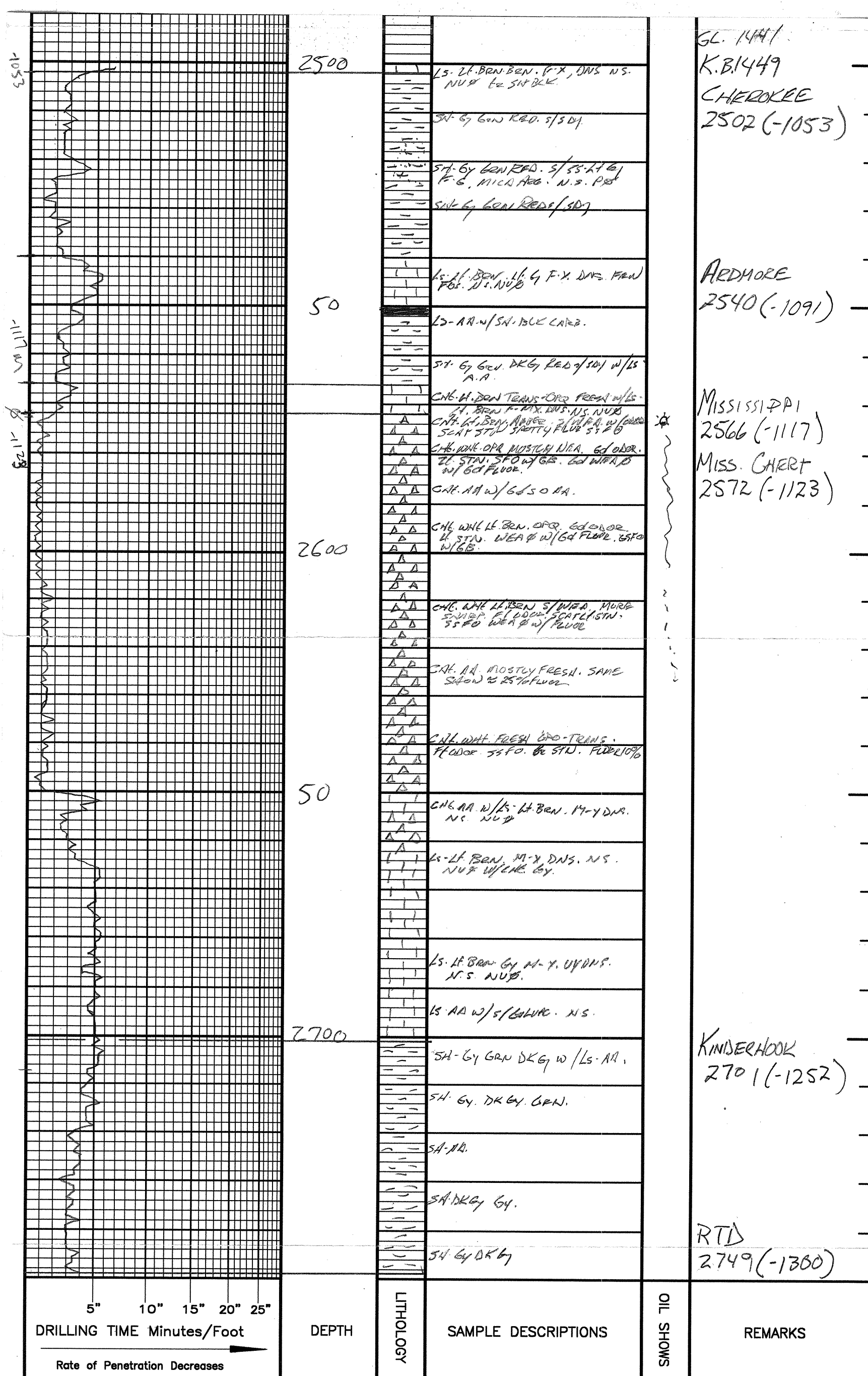
SAMPLE DESCRIPTIONS

Mississippi Chert 2566' (-1123)
 2566' - 2609'

Chert - white, light brown, opaque to translucent, good odor, light stain, weathered with pin point and vugular porosity, show free oil with gas bubbles, good fluorescence.

CONCLUSIONS

The decision to run casing was made to further evaluate the shows in the Mississippi through perforations.





CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 35629
LOCATION Eureka
FOREMAN Rick Ledford

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

FIELD TICKET & TREATMENT REPORT

CEMENT

API# 15-015-23957

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/26/12	7682	Weber A-3	19	245	5E	Butler
CUSTOMER Leon C. Smitherman Jr.			Gulick Orly			
MAILING ADDRESS 14331 Toppelary Circle			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Wichita			520	John		
STATE KS			611	Jay		
ZIP CODE 67230			637	Merle		

JOB TYPE 4/30 HOLE SIZE 7 7/8" HOLE DEPTH 2750' CASING SIZE & WEIGHT 5 1/2"
CASING DEPTH 2736' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 13.6# SLURRY VOL 55 BW WATER gal/sk 9.0 CEMENT LEFT in CASING 14'
DISPLACEMENT 66⁴ Bbl DISPLACEMENT PSI 1000 PSI 1500 Bump plug RATE _____

REMARKS: Safety meeting. Rig up to 5 1/2" casing. Break circulation w/ 15 Bbl fresh water. Mixed 1165 sks thickset cement w/ 5# Kal-seal/2x @ 13.6 #/gal. washbit pump + lines. Release latch down plug. Displace w/ 66⁴ Bbl fresh water. Final pump pressure 1000 PSI. Bump plug to 1500 PSI. release pressure, float + plug held. Good circulation @ all times while cementing. Job complete. Rig down.

Plugged cathode w/ 20 sks

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	20	MILEAGE	4.00	80.00
1126A	185 sks	thickset cement	19.20	3552.00
1110A	925#	5# Kal-seal/2x	.46	425.50
5407	10.17	ton mileage bulk trk	m/l	350.00
5502C	4 hrs	80 Bbl W.K. TEK	90.00	360.00
1123	3000 gals	city water	16.50/1000	49.50
4104	1	5 1/2" cement basket	229.00	229.00
4130	4	5 1/2" x 7 7/8" centralizers	48.00	192.00
4203	1	5 1/2" Guide Shoe	160.00	160.00
4228B	1	5 1/2" AFV insert float valve	172.00	172.00
4454	1	5 1/2" latch down plug	254.00	254.00
			Subtotal	6854.00
			SALES TAX	329.74
			ESTIMATED TOTAL	7183.74

Ravin 3737

AUTHORIZATION

Jay Smith

TITLE

054013

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.

