



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: _____



1108965

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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Douglas County, KS
 Well: Pearson 24
 Lease Owner: R.T Enterprises

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

Commenced Spudding:
 12/19/2012

WELL LOG

15-045-21844-00-00

Thickness of Strata	Formation	Total Depth
0-10	Soil-Clay	10
80	Sand	91
123	Shale	213
5	Lime	218
6	Sandy Shale	224
14	Lime	238
7	Shale	245
9	Lime	254
5	Shale	259
18	Shale	277
13	Shale	290
21	Sand	311
18	Lime	329
15	Sand	344
59	Shale	403
23	Lime	426
12	Shale	438
6	Shale	444
7	Lime	451
22	Shale	473
17	Lime	490
5	Shale	495
1	Lime	496
13	Shale	509
22	Lime	531
9	Shale	540
23	Lime	563
4	Shale	567
4	Lime	571
4	Shale	575
4	Lime	579
117	Shale	696
9	Sand	705
5	Sandy Shale	710
42	Shale	752
6	Lime	758
5	Shale	763
2	Lime	765
6	Shale	771
6	Shale	777

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 x PSI x .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. 24

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

Thickness of Strata	Formation	Total Depth	Remarks
0-10	Soil - clay	10	
80	Sand	90	60' - water
123	Shale	213	
5	Lime	218	
6	Sandy shale	224	
14	Lime	238	
7	shale - slate	245	
9	Lime	254	
5	shale	259	
18	shale & shells	277	
13	shale	290	
21	sand & sandy shale	311	no oil
18	lime & shells	329	
15	sand & sandy shale	344	no oil
59	shale	403	
23	Lime	426	
12	shale	438	
6	shale & lime	444	
7	Lime	451	
22	shale	473	
17	Lime	490	
5	shale	495	
1	Lime	496	
13	shale	509	
22	shale Lime	531	531
9	shale - slate	540	
23	Lime	563	

563

Thickness of Strata	Formation	Total Depth	Remarks
4	Shale - slate	567	
4	Lime	571	
4	shale	575	
4	Lime	579	Heath
117	Shale	696	
9	sand	705	no Oil
5	sandy shale	710	
42	shale	752	
6	Lime	758	
5	shale	763	
2	Lime	765	
6	shale & lime	771	
6	shale	777	
11	shale & lime	788	
12	shale	800	
3	Lime	803	
18	shale	821	
3	Lime	824	
26	shale	850	
1	Lime	851	
3	shale	854	
7	sandy shale	861	
3	sand	864	no Oil
8	sand	872	broken 25% Oil
7	sand	879	broken - mostly solid
19	core	898	
14	sand	912	solid Oil

CORE

Thickness of Strata	Formation	Total Depth	Remarks
		4879	
12	sand	4891	broken - mostly solid
7	sand	4898	solid



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 39033
LOCATION Hawg
FOREMAN Alan Maden

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-21-12		Pearson #24	SE 11	15	20	DG
CUSTOMER			TRUCK #			
Drenac			DRIVER			
MAILING ADDRESS			TRUCK #			
120 Shoreline Dr			DRIVER			
CITY			TRUCK #			
Houtsburg			DRIVER			
STATE			TRUCK #			
KS			DRIVER			
ZIP CODE			TRUCK #			
66053			DRIVER			
JOB TYPE <u>105 strings</u>			HOLE SIZE <u>5 5/8</u>			
HOLE SIZE			HOLE DEPTH <u>1000</u>			
CASING DEPTH <u>968</u>			CASING SIZE & WEIGHT <u>2 7/8</u>			
DRILL PIPE			OTHER <u>Drill pipe 938</u>			
SLURRY WEIGHT			WATER gal/sk			
SLURRY VOL			CEMENT LEFT in CASING <u>yes</u>			
DISPLACEMENT			DISPLACEMENT PSI <u>800</u>			
DISPLACEMENT FSI <u>800</u>			MIX PSI <u>200</u>			
REMARKS:			RATE <u>46pm</u>			
<p><u>Held crew meet. Established rate Mixed & pumped 100 # gel followed by 144 gal 50150 cement plus 2 7/8 gal. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PSI. Set float. Closed valve.</u></p>						

705, Wes

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030.00
5406	20	MILEAGE	368	80.00
5402	968	casing footage	368	
5407	1/2 mi	ton miles	558	175.00
5502C	1 1/2	80 vac	675	135.00
1124	144	50150 Cement		1576.80
1118B	348	gel		73.08
4402	1	2 1/2 plug		28.00
SALES TAX				112.48
ESTIMATED TOTAL				3220.36

Revin 3737

NO COMPANY WEP

AUTHORIZATION

Jim DKS

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.

255594