



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

Town Oilfield Service, Inc.

Commenced Spudding:

Well: Pearson 31

(913) 837-8400

1/3/2013

Lease Owner: R.T. Enterprises

15-045-21851-00-00

WELL LOG

Thickness of Strata	Formation	Total Depth
2	Soil-Clay	2
60	Sandstone	62
136	Shale	198
6	Lime	204
6	Shale	210
13	Lime	223
8	Shale	231
8	Lime	239
5	Shale	244
19	Shale	263
17	Shale	280
17	Sand	297
19	Lime	315
18	Sandy Shale	333
57	Shale	390
22	Lime	412
14	Shale	426
3	HS	429
7	Lime	436
24	Shale	460
15	Lime	475
6	Shale	481
1	Lime	482
13	Shale	495
23	Lime	518
8	Shale	526
24	Lime	550
3	Shale	553
5	Lime	558
4	Shale	562
5	Lime	567
3	Shale	570
10	Sand	580
17	Shale	597
5	Sandy Shale	602
8	Shale	610
11	Sandy Shale	621
11	Sand	632
26	Sandy Shale	658
27	Shale	685

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 - $\text{RPM} \times d$ over $\text{SPM} \times R$

d - $\text{SPM} \times R \times D$ over RPM

SPM - $\text{RPM} \times D$ over $R \times d$

R - $\text{RPM} \times D$ over $\text{SPM} \times d$

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

* Need these to figure belt length

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

746 WATTS equal 1 HP

Log Book

Well No. 31

Farm Pearson

KS Douglas
(State) (County)

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

For RT Enterprises
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Thickness of Strata	Formation	Total Depth	Remarks
2	soil/clay	2	
60	sandstone	62	water 40'
136	shale	194	
6	lime	204	
6	shale	210	
13	lime	223	
8	shale	231	
8	lime	239	
5	shale	244	
19	shale + shells	263	
17	shale	280	
17	sand + shale	297	no oil
19	lime	315	
18	sandy shale	333	with some sand, no oil
57	shale	390	
22	lime	412	
14	shale	426	
3	shale + lime	429	
7	lime	436	
24	shale	460	
15	lime	475	
6	shale	481	
1	lime	482	
13	shale	495	
23	lime	514	
8	shale	526	
24	lime	550	

Thickness of Strata	Formation	Total Depth	Remarks
		550	
3	shale	553	
5	Lime	558	
4	shale	562	
5	Lime	567	Merther
3	shale	570	
10	sand	580	grey, no oil
17	shale	597	
5	sandy shale	602	
8	shale	610	
11	sandy shale	621	
11	sand	632	grey, no oil
26	sandy shale	658	
27	shale	685	
10	sand	695	grey, no oil
5	sandy shale	700	
37	shale	737	
5	Lime	742	
8	shale	750	
6	limestone shale	756	
6	shale	762	
11	limestone shale	773	
11	shale	784	
3	Lime	787	
4	shale	791	
5	sand	796	Brown sandy, no oil
2	sandy shale	798	
7	shale	805	

805

Thickness of Strata	Formation	Total Depth	Remarks
2	lime	807	
22	shale	829	red bed - "813" - "817"
2	lime	831	
5	shale	836	
6	sand	842	sandy, no o.i
6	sand	848	10% o.i
10	sand	858	50% o.i slight bleeding
6	sandy lime	864	no o.i
24	sand	888	20% solid, good bleeding
1	sandy lime	889	10% o.i
1	sandy lime	890	no o.i
69	shale	959	TU



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 39081

LOCATION Ottawa

FOREMAN Alan Mader

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
1-7-13		Pearson # 31	SE 11	15	20	06

TRUCK #	DRIVER	TRUCK #	DRIVER
516	Ala Mad	Safety	Meat
368	Art Mad	ADM	
369	Der Mas	DM	
510	Set Tyc	ST	

CUSTOMER: Qtenroc
MAILING ADDRESS: 120 Shoreline Dr.
CITY: Louisburg STATE: KS ZIP CODE: 66053

JOB TYPE: long string HOLE SIZE: 5 3/8 HOLE DEPTH: 959 CASING SIZE & WEIGHT: 2 7/8
CASING DEPTH: 933 DRILL PIPE: _____ TUBING: _____ OTHER: baffle 904
SLURRY WEIGHT: _____ SLURRY VOL: _____ WATER gal/sk: _____ CEMENT LEFT in CASING: yes
DISPLACEMENT: _____ DISPLACEMENT PSI: 800 MIX PSI: 200 RATE: 4 bpm

REMARKS: Held meeting. Established rate. Mixed & pumped 100# gel followed by 129 sk 50/50 cement plus 2% gal. Circulated cement. Flushed pump. Pumped plug to bottle. Well held 800 PSI. Set float. Closed valve.

TOS, Chad

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
3401	1	PUMP CHARGE	368	1030.00
3406	20	MILEAGE	368	80.00
3402	933	casing footage	368	—
3407	min	van miles	510	350.00
3502C	2	80 gal	369	180.00
1124	129	50/50 cement		1412.55
1118B	317#	gel		66.57
4402	1	2 1/2 plug		28.00

Ravin 3737

No company rep

SALES TAX 110.02
ESTIMATED TOTAL 3257.14

AUTHORIZATION Jim OK'd

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