



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
<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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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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Air Drilling Specialist
Oil & Gas Wells

THORNTON AIR ROTARY, LLC
Office Phone: 620-879-2073

PO Box 449
Caney, KS 67333

Date Started	9/14/2012
Date Completed	9/17/2012



Operator	A.P.I #	County	State
Colt Energy	15-107-24634-00-00	Linn	Kansas

Well No.	Lease	Sec.	Twp.	Rge.
AA-3	Lanham	2	22	22

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
Oil	Brantley Thornton	4	21' 8 5/8	687	7 7/8

Formation Record

0-2	MUD	442-460	SHALE		
2-10	LIME	460-541	SANDY SHALE		
10-21	SANDY LIME	541-543	COAL / BLK SHALE		
21-37	LIME	543-570	SANDY SHALE		
37-45	SHALE	570-572	COAL		
45-62	LIME	572-600	SANDY SHALE		
62-65	SHALE	600-614	DARK SHALE		
65-80	LIME	614-616	COAL		
80-84	SHALE	616-644	SHALE		
84-90	LIME	644-650	SAND		
90-118	SANDY SHALE	650-652	COAL		
118-210	SAND	652-685	SANDY SHALE		
210-212	LIME	685-687	LMY SHALE		
212-274	SANDY SHALE	687	TD		
274-285	LIME				
285-311	LMY SHALE				
311-312	COAL				
312-330	LIME				
330-331	COAL				
331-350	LIME				
350-361	SHALE				
361-367	LIME				
367-400	SHALE				
400-405	LIME / SOFT				
405-408	LMY SHALE				
408-428	LMY SHALE				
428-430	COAL				
430-439	SANDY LIME				
439-441	BLACK SHALE				
441-442	SANDY SHALE /LIME				



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 35254

LOCATION Europe

FOREMAN Rick Ledford

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

FIELD TICKET & TREATMENT REPORT

CEMENT API# 15-107-24634

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-17-12	1829	Lanham (363) #A3	2	22	22E	LIQU
CUSTOMER <u>Colt Energy Inc.</u>						
MAILING ADDRESS <u>P.O. Box 388</u>						
CITY <u>Iola</u>		STATE <u>KS</u>	ZIP CODE <u>66749</u>			
TRUCK #	DRIVER	TRUCK #	DRIVER			
520	John					
611	Joey					
667	Chris B.					
637	Jim					

JOB TYPE L/S 0 HOLE SIZE 7 7/8" HOLE DEPTH 687 CASING SIZE & WEIGHT 5 1/2" 15.5"
 CASING DEPTH 686 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5# SLURRY VOL 30 Bbl WATER gal/sk 9.0 CEMENT LEFT in CASING 20'
 DISPLACEMENT 15 3/4" DISPLACEMENT PSI 250# MAX PSI 200 shut in RATE _____

REMARKS: Safety meeting. Rig up to 5 1/2" casing w/washhead. Wash down to BSTD. Rig up to cement. Pump 6 sks gel-flush, 5 Bbl water spacer, 8 Bbl dye water. Mixed 80 sks OWC cement w/ 40% silica flour @ 13.5#/gal. shut down, washout pump & lines, stuff plug. Displace w/ 15 3/4 Bbl water to 666' followed by wireline. Final pump pressure 250 PSI. Closed well in @ 200 PSI. Good cement returns to surface ~ 5 Bbl slurry to pit. Job complete Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	1	MILEAGE 2 nd well of 3	n/c	n/c
1126	80 sks	OWC cement	18.80	1504.00
1139	3010 #	40% silica flour	.53	1595.30
1118B	300 #	gel-flush	.21	63.00
5407A	5.6	ton mileage bulk trk	1.34	375.20
5502C	3 1/2 hrs	80 Bbl VAC. TRK	90.00	315.00
4406	1	5 1/2" top water plug	70.00	70.00
			Subtotal	4952.50
			6.3% SALES TAX	203.63
			ESTIMATED TOTAL	5156.13

Ravin 3737

AUTHORIZATION

R.R. Block

TITLE

263140

DATE

9/19/2012

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.