



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: _____



1119549

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
_____ 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
-----------------------------------	-----------	---------	-------------	---------------	---------

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

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	9/17/2012
Date Completed	9/18/2012



Operator	A.P.I #	County	State
Colt Energy	15-107-24635-00-00	Linn	Kansas

Well No.	Lease	Sec.	Twp.	Rge.
BB3-I	Lanham	2	22	27

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
INJ-01	Brantley Thornton	4	22'2" 8 5/8	684	7 7/8

Formation Record

0-3	MUD	568-581	SAND		
3-7	LIME	581-582	LIME		
7-24	SANDY LIME	582-584	COAL		
24-75	LIME	584-610	SANDY SHALE		
75-77	BLACK SHALE	610-612	BLK SHALE / COAL		
77-82	LIME	612-633	SHALE		
82-86	SHALE	633-634	LIME		
86-89	LIME	634-635	BLACK SHALE		
89-105	SHALE	635-648	SANDY SHALE		
105-240	SANDY SHALE	648-649	COAL		
240-242	BLACK SHALE	649-683	SANDY SHALE		
242-257	SANDY SHALE	683-684	SAND		
257-260	LMY SAND	684	TD		
260-282	LIME				
282-328	SAND				
328-329	COAL				
329-335	SANDY SHALE				
335-354	LIME				
354-355	COAL				
355-400	SANDY SHALE				
400-429	LIME				
429-430	COAL				
430-438	SANDY LIME				
438-439	BLACK SHALE				
439-500	SANDY SHALE				
500-537	SHALE				
537-538	LIME				
538-539	COAL				
539-567	SANDY SHALE				
567-568	BLACK SHALE				



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 35253 ✓

LOCATION Eureka

FOREMAN Rick Ledford

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

FIELD TICKET & TREATMENT REPORT

CEMENT API# 15-107-24635

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/19/12	1828	Lanham (363) # BB3-i	2	22	22E	LIFF
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					
64	Jacy					
637	Jim					

JOB TYPE L/S 0 HOLE SIZE 7 7/8" HOLE DEPTH 684' CASING SIZE & WEIGHT 5 1/2" 15.5"
 CASING DEPTH 682' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5" SLURRY VOL 30 Bbl WATER gal/sk 9.0 CEMENT LEFT in CASING 19'
 DISPLACEMENT 15 3/4 Bbl DISPLACEMENT PSI 250 ~~MAX~~ PSI 200" Shut in RATE _____

REMARKS: Safety meeting- Rig up to 5 1/2" casing w/ washhead. Wash to 1670. Rig up to cement. Pump 6 sec gel-flush, 5 Bbl water spacer, 8 Bbl dye water. Mixed 80 sec OWC cement w/ 40% silica flour @ 13.5"/gal. shut down, washout pump + lines stuff plug. Displace w/ 15 3/4 Bbl water to 663' followed plug w/ wireline. Final pump pressure 250 PSI. Shut 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	50	MILEAGE	4.00	200.00
1126	80 sxs	OWC cement	18.80	1504.00
1139	3010 #	40% silica flour	.53	1595.30
11185	300 #	gel-flush	.21	63.00
5407A	56	tan mileage bulk tax	1.34	375.20
5502C	3 1/2 hrs	80 Bbl VAC. TRK	90.00	315.00
1123	3000 gals	city water	16.50/1000	49.50
4406	1	5 1/2" top rubber plug	70.00	70.00
			Subtotal	5202.00
			SALES TAX 6.3%	206.75
			ESTIMATED TOTAL	5408.75

Ravin 3737

253139

6.3%

AUTHORIZATION Rick Ledford

TITLE R

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.