



**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 Bbbs.	Gas Mcf	Water Bbbs.	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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**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 38917  
LOCATION Ottawa KS  
FOREMAN Fred Maden

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/20/12	2579	Carter "B" BSI-CB-14	NW 18	18	21	FR
CUSTOMER Enerjex Resources Inc			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 10975 Grandview Dr			506	Fred Mad	Safety	WJ
CITY Overland Park			495	Har Bec	HB	
STATE KS			369	Der Mas	DM	
ZIP CODE 66210			510	Set Tuc	ST	

JOB TYPE Long string HOLE SIZE 6" HOLE DEPTH 640' CASING SIZE & WEIGHT 2 7/8 EUE  
 CASING DEPTH 626' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plug  
 DISPLACEMENT 3.64 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Establish pump rate. Mix + Pump 100# Gel Flush. Mix + Pump 103 sks  
 70/30 Por Mix Cement 2% Gel 5% Salt 1/2# Pheno Seal/sk. Cement to  
 surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to  
 casing TD. Pressure to 800# PSI. Hold & Monitor pressure  
 for 30 min MIT. Release pressure to set float valve.  
 Shut in casing.

JTC Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 <sup>00</sup>
5406	20 mi	MILEAGE	455	80 <sup>00</sup>
5402	626	Casing footage		N/C
5407	1/2 Minimum	Ton Miles	570	175 <sup>00</sup>
5502C	2 hrs	80 BBL Vac Truck	369	180 <sup>00</sup>
1127	103 sks	70/30 Por Mix Cement		1308 <sup>10</sup>
118B	282#	Premium Gel		59 <sup>22</sup>
1111	209#	Granulated Salt		77 <sup>33</sup>
1107A	52#	Pheno Seal		67 <sup>02</sup>
4402	1	2 1/2" Rubber plug		28 <sup>00</sup>
<b>SCANNED</b>				
			7.8%	SALES TAX
				ESTIMATED TOTAL
				120 <sup>20</sup>
				13124 <sup>83</sup>

Ravin 3737

AUTHORIZATION \_\_\_\_\_ 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 for

## DRILL LOG

Operator License# 33741

API # 15-059-26088-00-00

Operator Enerjex Kansas

Lease Name Carter B

Address 27 Corporate Woods, #350

Well # BSI CB 14

Phone 913-754-7754

Spud Date 11/15/12 Cement 11/20/12

Contractor License # 32834

Contractor JTC Oil, Inc.

T.D 640 TD of Pipe 626

3 sacks cement

Surf. Pipe Size 7" \_\_\_ Depth 20ft \_\_\_

County Franklin

Thickness	Strata	From	To	Thickness	Strata	From	To
2	soil	0	2				
5	clay	2	7	5	coal	246	251
66	shale	7	73	16	lime	251	267
20	lime	73	93	39	shale	267	306
23	shale	93	116	9	sand	306	315
4	lime	116	120	95	shale	315	410
6	red bed	120	126	5	red bed	410	415
40	shale	126	163	9	shale	415	424
15	lime	163	178	14	lime	424	438
10	shale	178	188	7	shale	438	445
29	lime	188	217	10	shale sand	445	455
8	black shale	217	225	8	sand	455	463

2	lime	225	246	21	shale	463	484
				3	coal	484	487
				1	shale	487	488
				8	lime	488	496
				11	shale	496	507
				3	black shale	507	510
				2	lime	510	512
				11	black shale	512	523
				12	lime	523	535
				6	shale	535	541
				4	red bed	541	545
				2	shale	545	547
				2	lime	547	549
				2	coal	549	551
				5	lime	551	556
				5	shale	556	561
	Good			3	oil sand	561	564
	Very good			3	oil sand	564	567
	Very good			3	oil sand	567	570
	Very good			3	oil sand	570	573
	Good			3	oil sand	573	576
	Broken			2	oil sand	576	578

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<b>Good</b>	<b>3</b>	<b>oil sand</b>	<b>578</b>	<b>581</b>
<b>Broken</b>	<b>3</b>	<b>shale sand</b>	<b>581</b>	<b>584</b>
	<b>56</b>	<b>shale</b>	<b>584</b>	<b>640</b>

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