



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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Lone Jack Oil Company

Blue Mound, KS

1-913-756-2307 1-620-363-0492

Lease: RE Camp Operator: Evans Oil API # 15-011-24228-0000
 Contractor: Lone Jack Oil Company Date Started: 2/13/13 Date Completed: 2/20/13
 Total Depth: 662 feet Well # 12-OE Hole Size: 5 5/8
 Surface Pipe: 20' 6 1/4 Surface Bit: 9 7/8 Sacks of Cement: 5
 Depth of Seat Nipple: _____ Rag Packer At: _____
 Length and Size of Casing: 654- 2 7/8 Sacks of Cement: 85
 Legal Description: NE SW NE NE Sec: 36 Twp: 23S Range: 21E County: Bourbon

Thickness	Depth	Type of Formation	Core Thickness	Depth	Time
2	2	Top Soil	1	634-635	0:42 Oil Sand
41	43	Lime	2	635-636	0:40 Oil Sand
5	48	Shale	3	636-637	0:39 Oil Sand
3	51	Lime	4	637-638	1:33 Oil Sand
3	54	Shale	5	638-639	1:33 Oil Sand
24	78	Lime	6	639-640	2:01 Oil Sand
3	81	Shale	7	640-641	2:29 Oil Sand
4	85	Lime	8	641-642	2:07 Oil Sand
6	91	Shale	9	642-643	2:02 Oil Sand
5	96	Lime	10	643-644	2:45 Black Sand
2	98	Shale	11	644-645	3:08 Black Sand
12	110	Lime	12	645-646	3:10 Black Sand
12	222	Shale	13	646-647	2:11 Black Sand
4	226	Lime	14	647-648	1:18 Black Sand
47	273	Shale	15	648-649	1:34 Black Sand
3	276	Lime	16	649-650	1:23 Black Sand
10	286	Shale w/ Lime Streaks	17	650-651	1:27 Black Sand
8	294	Lime	18	651-652	1:50 Black Sand
71	365	Shale	19	652-653	1:40 Black Sand
16	381	Lime	20	653-654	1:04 Black Sand
7	388	Shale			
6	394	Lime			
42	436	Shale			
5	441	Lime			
2	443	Shale			
10	453	Lime			
7	460	Shale			
6	466	Lime			
166	632	Shale			
2	634	Oil Sand (Good Bleed)			
20	654	Ran Core			
8	662	Black Sand			
	662	TD			

802 N. Industrial Rd.
 P.O. Box 664
 Toke, Kansas 66749
 Phone: (620) 365-5588

Payless Concrete Products, Inc.



CONDITIONS
 Contractor to be delivered to the nearest accessible point over passable road.
 Under no circumstances will the seller be responsible for damages in any manner to sidewalks,
 roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's
 risk. The material is delivered for unloading truck is to be left on the street
 with no other instructions. The customer is responsible for obtaining the correct
 water contents for strength or mix indicated. We do not assume responsibility for
 strength loss when water is added at customer's request.
NOTICE TO OWNER
 Failure of this contractor to pay those persons supplying material or services to
 complete the contract can result in the filing of a mechanic's lien on the property
 which is the subject of the contract.

CAMP 12-0E

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	DRIVER/RUCK	PLANT/TRANSACTION #

DATE	LOAD #	YARDS DEL.	BATCH#	WATER TRIM	SUMP	TICKET NUMBER

WARNING

IRRITATING TO THE SKIN AND EYES
 Contains Potassium Chloride, High Silica Dusts and Glass FIBREGLASS CONTACT MAY
 CAUSE SKIN AND EYE CONTACT WITH EYES AND THROAT CONTACT WILL CAUSE
 CONTACT WITH SKIN OR EYES, RUSH THROUGH WITH WATER. If Irritation Persists, Get Medical
 Attention. KEEP CHILDREN AWAY.

CONCRETE IS A PERISHABLE COMMODITY and because the PROPERTY OF THE PURCHASER UPON
 LEAVING THE PLANT, ANY CHANGES OR CONCESSIONS OF ORIGINAL INSTRUCTIONS MUST BE
 TELEPHONED TO THE OFFICE BEFORE LOADING STARTS.
 The undersigned promises to pay, at once, including reasonable attorney's fees, incurred in collecting
 any sums owed.
 All accounts not paid within 30 days of delivery will bear interest at the rate of 2% per annum.
 Not Responsible for Reactive Aggregate or Color Change, the Client Assumed Unless Made at Time
 Material is Delivered.
 Excess Delay Time Charged @ \$100/hr.

PROPERTY DAMAGE RELEASE
 Dear Customer, the driver of the truck in presenting this RELEASE to
 you, for your signature is of the opinion that the size and weight of the
 truck may possibly cause damage to the premises and/or to the
 contents of the premises in every way that we can, and in order to do this
 the driver is requesting that you sign this RELEASE relating him and
 the supplier from any responsibility for any damage that may occur
 to the premises and/or adjacent property, including, sidewalks,
 driveways, etc., by the delivery of the material of this order.
 However, once, by the delivery of the material of this order, the
 driver will not bear the public trust. Further, as additional consideration,
 the undersigned agrees to identify and hold harmless the driver
 of the truck and the supplier for any and all damage to the premises
 and/or adjacent property which may be claimed by anyone in this
 area, out of delivery of this order.

Excessive Water is Detrimental to Concrete Performance
 H₂O Added By Request/Authorized By

 WEIGHTMASTER
 GAL X
 NOTICE IN SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEAVY WARNING
 NOTICE AND I AM FULLY RESPONSIBLE FOR ANY DAMAGE CAUSED
 WHEN BEHAVING INSIDE CURB LINE.
 LOAD RECEIVED BY:

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE

Surface CAMP 12-0E 505X
 PD, #1463

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED

LEFT PLANT	ARRIVED JOB	START UNLOADING	TIME DUE

TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME	DELAY TIME

5.000	51.000	255.000
2.000	25.000	100.000
2.000	50.000	100.000
ADDITIONAL CHARGE 1		515.000
ADDITIONAL CHARGE 2		555.000
GRAND TOTAL		1025.000

Lone Jack Oil Company
509 East Walnut
Blue Mound, KS 66010

Invoice

Date	Invoice #
2/20/2013	1604

Bill To
Osage Energy LLC 2100 West Virginia Road Colony, KS 66015

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	Camp 12-OE		
1	2/20/13, Well #12-OE, circulated 85 sacks of cement to surface, pumped plug and set float shoe.	700.00	700.00T
1	Water Truck	100.00	100.00T
	Sales Tax	7.55%	60.40
Thank you for your business.		Total	\$860.40

PAYLESS CONCRETE PRODUCTS, INC.

P.O. BOX 664
 802 N. INDUSTRIAL RD.
 IOLA, KS 66749

INVOICE

Invoice Number: 33648
 Invoice Date: Feb 20, 2013
 Page: 1

Voice: 620-365-5588
 Fax:

Duplicate

Bill To:
 CASH FOR C.O.D.'S
 802 N. INDUSTRIAL RD.
 IOLA, KS 66749

Ship to:
 OSAGE ENERGY LLC
 2100 W. VIRGINIA RD
 COLONY, KS 66015

Customer ID	Customer PO	Payment Terms	
CASH/C.O.D.	OSAGE/RE CAMP 12 OE	C.O.D.	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	TRUCK		2/20/13

Quantity	Item	Description	Unit Price	Amount
85.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX	5.10	433.50
85.00	MH	MIXING & HAULING	2.50	212.50
2.00	TRUCKING	TRUCKING CHARGE	50.00	100.00
<i>Balance Ad</i>				
<i>IOC 12-0E</i>				

Subtotal	746.00
Sales Tax	54.46
Total Invoice Amount	800.46
Payment/Credit Applied	693.16
TOTAL	107.30

Check/Credit Memo No: 1464 (#33648)