



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: _____



1132580

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
---	--	--

Johnson County, KS
Well: T.E.A. I-4A
Lease Owner: D.E. Exploration

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
1/17/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-15	Soil-Clay	15
23	Lime	38
6	Shale	44
10	Lime	54
5	Shale	59
19	Lime	78
12	Shale	90
10	Sand	100
5	Sandy Shale	105
26	Lime	131
34	Shale	165
12	Lime	177
18	Shale	195
8	Lime	203
8	Shale	211
10	Lime	221
14	Shale	235
5	Shale	240
7	Lime	247
7	Shale	254
5	Lime	259
33	Shale	292
2	Lime	294
10	Shale	304
25	Lime	329
6	Shale	335
23	Lime	359
4	Shale	362
4	Lime	366
3	Shale	369
7	Lime	376
30	Shale	406
10	Sand	416
132	Shale	548
5	Lime	553
3	Shale	556
2	Lime	558
11	Shale	569
7	Lime	576
15	Shale	591

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 $BPH \times PSI \times .0004$

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 - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

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

* Need these to figure belt length

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

746 WATTS equal 1 HP

Log Book

Well No. I-4A

Farm T.E.A.

KS Johnson
(State) (County)

1 15 21
(Section) (Township) (Range)

For D.E. Exploration
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East
Louisburg, KS 66053
913-710-5400

T.E.A. Farm: Johnson County
KS State; Well No. I-44

Elevation 992

Commenced Spudding Jan 17 2013

Finished Drilling Jan 18 2013

Driller's Name Wesley Dellaard

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Ryan Ward

Tool Dresser's Name Cole Holcomb

Tool Dresser's Name _____

Contractor's Name TOS

1 15 21

(Section) (Township) (Range)

Distance from S line, 2960 ft.

Distance from E line, 1325 ft.

2 sacks
 9 hrs

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
885.25		Barrel			
916.95		float			
					27/8

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
 8" Set _____ 8" Pulled _____
 7 5/8" Set 21 6 1/4" Pulled _____
 4" Set _____ 4" Pulled _____
 2" Set _____ 2" Pulled _____

Thickness of Strata	Formation	Total Depth	Remarks
0-15	soil - clay	15	
23	Lime	38	
6	shale	44	
10	Lime	54	
5	shale	59	
19	Lime	78	
12	shale - redbed	90	
10	sand	100	no Oil
5	sandy shale	105	
26	Lime	131	
34	shale	165	some sand - water
12	Lime	177	
18	shale	195	
8	Lime	203	
8	shale	211	
10	Lime	221	
14	shale	235	
5	green shale & lime	240	
7	Lime	247	
7	shale	254	
5	Lime	259	
33	shale	292	
2	Lime	294	
10	shale	304	
25	Lime	329	
6	shale	335	
23	Lime	358	

358

Thickness of Strata	Formation	Total Depth	Remarks
4	shale	362	
4	lime	366	
3	shale	369	
7	lime	376	Hertha
30	shale	406	
10	sand	416	no oil
132	shale	548	
5	lime	553	
3	shale	556	
2	lime	558	
11	shale	569	
7	lime	576	
15	shale	591	
3	lime	594	
12	shale	606	
6	lime	612	
18	shale	630	
3	lime	633	
1	shale	634	
2	lime	636	
69	shale	705	
5	sand & shale	710	no oil
118	shale	828	
1	sandy lime	829	solid oil } gasel saturation
6	sand	835	
105	sandy shale	940	TD



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 256076

Invoice Date: 01/22/2013 Terms: 0/0/30,n/30

Page 1

D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

TEA I-4A
38742
1-15-21
01-21-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	124.00	10.9500	1357.80
1118B	PREMIUM GEL / BENTONITE	308.00	.2100	64.68
1111	SODIUM CHLORIDE (GRANULA	240.00	.3700	88.80
1110A	KOL SEAL (50# BAG)	620.00	.4600	285.20
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	1030.00	1030.00
368 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
368 CASING FOOTAGE	917.00	.00	.00
558 MIN. BULK DELIVERY	1.00	350.00	350.00
675 80 BBL VACUUM TRUCK (CEMENT)	3.00	90.00	270.00

Parts: 1824.48 Freight: .00 Tax: 137.29 AR 3731.77
Labor: .00 Misc: .00 Total: 3731.77
Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914



CONSOLIDATED
Oil Well Services, LLC

256076

TICKET NUMBER 38742

LOCATION Ottawa

FOREMAN Alan Maden

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
1-21-1	2355	T.F.A. I-4.A	NE 1	15	21	JD
CUSTOMER DE Exploration			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 128			516	Ala Mad	Safety	Meat
CITY STATE ZIP CODE Wellsville KS 66092			368	Al Mad	MT	
			675	Mik Tag	MT	
			558	Bre Mar	BN	

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 940 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 917 DRILL PIPE _____ TUBING _____ OTHER 885 Baffle
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING yes
 DISPLACEMENT 5.1 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Had meeting. Established circulation because well had set on hole TD over weekend. Waited while nearby well was plugged. Mixed & pumped 100# gel because well had been conditioned previously. Mixed & pumped 124 sk 50150 cement plus 5# Kolseal, 5% salt, 2% gel per sq ft. Circulated cement. Flushed pump. Pumped plug to casing baffle. Closed side valve on well head with 3/4 bbl to go. Well pressured to 500#. Released pressure. Closed side valve again with 1/4 bbl to go. Was able to pump plug down. Set float. Closed valve. TOG, was Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030.00
5406	30	MILEAGE	368	12000
5402	917	casing footage	360	
5407	min	ten miles	558	350.00
5502C	3	80 vac	675	270.00
1124	124 sk	50150 cement		1357.80
118B	308#	gel		64.68
1111	240#	salt		88.80
1110A	620#	Kolseal		285.20
4402	1	2 1/2 plug		28.00
				completed

Ravin 3737
 AUTHORIZATION [Signature] TITLE _____ DATE _____
 SALES TAX 137.29
 ESTIMATED TOTAL 3731.77

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.