



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: 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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Johnson County, KS
 Well: T.E.A.I-11
 Lease Owner: DE Exploration

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

Commenced Spudding:
 1/23/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-18	Soil-Clay	18
11	Shale	29
7	Lime	36
4	Sand	40
16	Lime	56
8	Shale	64
9	Lime	73
5	Shale	78
18	Lime	96
14	Shale	110
10	Sand	120
3	Sandy Shale	123
24	Lime	147
33	Shale	180
12	Lime	192
20	Shale	212
9	Lime	221
8	Shale	229
10	Lime	239
14	Shale	253
6	Lime	259
7	Lime	266
6	Shale	272
6	Lime	278
33	Shale	311
2	Lime	313
9	Shale	322
25	Lime	347
7	Shale	354
22	Lime	376
5	Shale	381
4	Lime	385
3	Shale	388
7	Lime	395
169	Shale	564
5	Lime	569
3	Shale	572
6	Lime	578
29	Shale	607
3	Lime	610

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 x PSI x .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-11

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-11

Elevation 1001

Commenced Spuding Jan 23 2013

Finished Drilling Jan 24 2013

Driller's Name Wesley Dollard

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Kyan Ward

Tool Dresser's Name Coit Stone

Tool Dresser's Name _____

Contractor's Name TOS

1 15 21

(Section) (Township) (Range)
Distance from S line, 4400 ft.

Distance from E line, 2110 ft.

3 sacks

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____

8" Set _____ 8" Pulled _____

~~7 1/2~~" Set 25 6 1/2" Pulled _____

4" Set _____ 4" Pulled _____

2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
<u>886</u>	<u>25</u>	<u>Baffle</u>			
<u>918-</u>		<u>float</u>		<u>27</u>	<u>18</u>

Thickness of Strata	Formation	Total Depth	Remarks
0-18	soil-clay	18	
11	shale	29	
7	Lime	36	
4	sand	40	no oil
14	Lime	56	
8	shale	64	
9	Lime	73	
5	shale	78	
18	Lime	96	
14	shale - red bed	110	
10	sand	120	no oil
3	sandy shale	123	
24	Lime	147	
33	shale	180	
12	Lime	192	
20	shale	212	
9	Lime	221	
8	shale	229	
10	Lime	239	
14	shale	253	
6	green shale & lime	259	
7	Lime	266	
6	shale	272	
6	Lime	278	
33	shale	311	
2	Lime	313	
9	shale	322	

322

Thickness of Strata	Formation	Total Depth	Remarks
25	Lime	347	
7	shale	354	
22	Lime	376	
5	shale	381	
4	Lime	385	
3	shale	388	
7	Lime	395	
169	shale	564	Hardly
5	Lime	569	
3	shale	572	
6	Lime	578	
29	shale	607	
3	Lime	610	
12	shale	622	
3	Lime	625	
24	shale	649	
2	Lime	651	
3	shale	654	
1	Lime	655	
66	shale	721	
10	sand & shale	731	no oil
106	shale	837	
1	Lime	838	
1	shale sand	839	broken - 50% oil
7	sand	846	broken - mostly solid - ^{good} saturation
94	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 # 256247

Invoice Date: 01/25/2013 Terms: 0/0/30,n/30

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

TEA I-11
38756
1-15-20
01-24-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	117.00	10.9500	1281.15
1118B	PREMIUM GEL / BENTONITE	297.00	.2100	62.37
1111	SODIUM CHLORIDE (GRANULA	226.00	.3700	83.62
1110A	KOL SEAL (50# BAG)	585.00	.4600	269.10
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
495 CASING FOOTAGE	918.00	.00	.00
558 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1747.87 Freight: .00 Tax: 131.53 AR 3559.40
Labor: .00 Misc: .00 Total: 3559.40
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

256247

TICKET NUMBER 38756

LOCATION Oftawa KS

FOREMAN Fred Mader

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
1/24/13	2355	TEA # I-11	NE-1	15	20	JD
CUSTOMER DE Exploration			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 128			506	Fred Mad	Safety	Mty
CITY STATE ZIP CODE			495	Har Bec	HB	
Wellsville	KS	66092	370	Jas Ric	JR	
			558	Broman	BM	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 940 CASING SIZE & WEIGHT 2 3/8 EUE
 CASING DEPTH 918 DRILL PIPE Baffle TUBING @ 2 3/8 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug + 32'
 DISPLACEMENT 5.15 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Hold crew making. Mix + Pump 1/2 Gal HE-100 Polymer. Circulate well to condition hole. Mix + Pump 100# Gel flush. Mix + Pump 117 sks 50/50 Por Mix Cement 2% Gel 5% Salt 5# Kol Seal/sk. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to baffle in casing. Pressure to 800* PSI. Release pressure to set float valve. Shut in casing.

Tois Drilling

Wes

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	30	MILEAGE	495	120 ⁰⁰
5402	918'	Casing Footage		N/C
5407	Minimum	Ten Miles	558	350 ⁰⁰
5502C	2 hrs	80 BBL Vac Truck	370	180 ⁰⁰
1124	117 sks	50/50 Por Mix Cement		1281 ¹⁵
118B	297#	Premium Gel		62 ³⁷
1111	226#	Granulated Salt		83 ⁶³
1140A	585#	Kol Seal		269 ⁵⁰
4402	1	2 1/2" Rubber plug		28 ⁰⁰
1401	1/2 Gal	HE-100 polymer		23 ⁶³
			7.525%	SALES TAX
				ESTIMATED TOTAL
				131 ⁵³
				3559 ⁴⁰

Completed

Revin 9737

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 form