



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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Johnson County, KS
Well: Thompson 21
Lease Owner: DE Exploration

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

Commenced Spudding:
2/19/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
6	Soil-Clay	6
5	Lime	11
4	Shale	15
15	Lime	30
6	Shale	36
9	Lime	45
7	Shale	52
18	Lime	70
13	Shale	83
12	Sand	95
4	Sandy Shale	99
25	Lime	124
36	Shale	160
12	Lime	172
19	Shale	191
7	Lime	198
6	Shale	204
11	Lime	215
20	Shale	235
7	Lime	242
5	Shale	247
5	Lime	252
34	Shale	286
1	Lime	287
10	Shale	297
25	Lime	322
7	Shale	329
23	Lime	352
3	Shale	355
5	Lime	360
3	Shale	363
6	Lime	369
3	Shale	372
7	Sand	379
9	Sandy Shale	388
8	Shale	396
6	Sand	402
4	Sandy Shale	410
111	Shale	527
7	Sandy Shale	534

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. 21

Farm Thompson

KS Johnson
(State) (County)

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

For DE EXPLORATION, INC.
(Well Owner)

Town Oilfield Services, Inc.

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

Thompson Farm: Johnson County
KS State; Well No. 21

Elevation 988

Commenced Spuding 2/19 20 13

Finished Drilling 2-20 20 13

Driller's Name Braden Stone

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Chad Weaver

Tool Dresser's Name _____

Tool Dresser's Name C.H. Stone

Contractor's Name TCS

1 15 21

(Section) (Township) (Range)

Distance from S line, 1950 ft.

Distance from E line, 1130 ft.

1095-

3- SACKS CEMENT

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
7 1/8" Set 22 FT. 8" Pulled _____
6 1/4" Set _____ 6 1/4" Pulled _____
4" Set _____ 4" Pulled _____
2" Set 378.15 2" Pulled _____

5-46 28 2.0676
5-17 seed nipple
9.20 TD

Thickness of Strata	Formation	Total Depth	Remarks
6	soil layer	6	
5	Lime	11	
4	shale	15	
15	Lime	30	
6	Shale	36	
9	Lime	45	
7	Shale	52	
18	Lime	70	
13	Shale - bedded	83	
12	Sand	95	NO OIL
4	Sandy shale	99	
25	Lime	124	
36	Shale	160	
12	Lime	172	
19	Shale	191	
7	Lime	198	
6	Shale	204	
11	Lime	215	
20	Shale	235	
7	Lime	242	
5	Shale	247	
5	Lime	252	
34	Shale	286	
1	Lime	287	
10	Shale	297	
25	Lime	322	
7	Shale	329	

Thickness of Strata	Formation	Total Depth	Remarks
		329	
23	Lime	352	
3	Shale	355	
5	Lime	360	
3	Shale	363	
6	Lime	369	HEATHA
3	Shale	372	
7	Sand	379	NO OIL
9	Sandy Shale	388	
8	Shale	396	
16	Sand	412	NO OIL
4	Sandy Shale	416	
111	Shale	527	
7	Sandy Shale	534	
5	Shale	539	
5	Lime	544	
3	Shale	547	
2	Lime	549	
2	Shale	551	
3	Lime	554	
6	Shale	560	
7	Lime	567	
15	Shale	582	
3	Lime	585	
11	Shale	596	
3	Lime	599	
20	shale	619	
1	Lime	620	

620

Thickness of Strata	Formation	Total Depth	Remarks
3	shale	623	
1	lime	624	
68'	shale	692	
13	sand	705	above, no bleeding, Brown sand
4	sandy shale	709	
10	shale	719	
6	shale & lime	725	
30	sand & shale	755	
10	shale	765	
17	sandy shale	782	
35	shale	817	
1	lime	818	
2	broken sand	820	above, no oil, no bleeding
3	sand	823	85% - 90% oil, good bleeding
3	sand	826	90% - solid oil
1	sand	827	30% oil
2	sandy shale	829	no oil
8	broken sand	837	no oil
53	shale	890	red bed - 575'



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 # 256969

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Invoice Date: 02/26/2013 Terms: 0/0/30,n/30

Page 1

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

THOMPSON 21
38825
1-15-21
02-20-2013
KS

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Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	114.00	10.9500	1248.30
1118B	PREMIUM GEL / BENTONITE	292.00	.2100	61.32
1111	SODIUM CHLORIDE (GRANULA	220.00	.3700	81.40
1110A	KOL SEAL (50# BAG)	570.00	.4600	262.20
1401	HE 100 POLYMER	.50	47.2500	23.63
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)	.00	4.00	.00
368 CASING FOOTAGE	878.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
503 MIN. BULK DELIVERY	1.00	350.00	350.00

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Parts: 1704.85 Freight: .00 Tax: 128.29 AR 3393.14
Labor: .00 Misc: .00 Total: 3393.14
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

256969

TICKET NUMBER 38825
LOCATION Ottawa
FOREMAN Alan Madia

FIELD TICKET & TREATMENT REPORT
CEMENT

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-20-13	2355	Thompson 21	SE 1	15	21	Jo
CUSTOMER DE Exploration			TRUCK #			
MAILING ADDRESS P.O. Box 128			DRIVER			
CITY Wellsville	STATE KS	ZIP CODE 66092	516	Ala Mad	Safety	Meat
JOB TYPE <u>long string</u>			368	Al Mad	AM	
CASING DEPTH <u>878</u>	HOLE SIZE <u>5 3/8</u>	HOLE DEPTH <u>920</u>	370	Kei Car	KC	
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	503	Dan Det	DD	
DISPLACEMENT <u>4.9</u>	DISPLACEMENT PSI <u>800</u>	MIX PSI <u>200</u>	CEMENT LEFT in CASING <u>yes</u>			
REMARKS:			OTHER <u>848 baffle</u>			

Held safety meet. Hooked to casing. Established rate. Mixed & pumped 1/2 gal polymer. Circulated to condition hole. Mixed & pumped 100# gel followed by 114 sk 50/150 cement plus 270 gal 590 salt, 5# hole seal per sack. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 P.S.T. Closed valve on broaden head with 1/4 bbl left to pump plug.

TOS, Chad

Alan Madia

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE	368	1030.00	
5406		MILEAGE	368		
5402	878	casing footage	368		
5407	min	ten miles	503	350.00	
5502C	2	80 vac	370	180.00	
1124	114	50/150 cement		1248.30	
1118B	292#	gel		61.32	
1111	220#	salt		81.40	
1110A	370#	hole seal		262.20	
1401	1/2 gal	polymer		23.63	
4402	1	2 1/2 plug		28.00	
				SALES TAX	128.29
				ESTIMATED TOTAL	3393.14

completed

NO company rep
AUTHORIZATION Jim Oka

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