



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: _____



1133487

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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#254972



CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Endeaver	State, County	Sumner, Kansas	Cement Type	CLASS A
Job Type	surface	Section	21	Excess (%)	100
Customer Acct #	2520	TWP	34s	Density	14.5
Well No.	Stalnakar 21-1A	RGE	2e	Water Required	
Mailing Address		Formation		Yield	1.45
City & State		Hole Size	13 1/2	Slurry Weight	
Zip Code		Hole Depth	257	Slurry Volume	
Contact		Casing Size	10 3/4 INCH, 35	Displacement	23
Email		Casing Depth	250	Displacement PSI	
Cell		Drill Pipe		MIX PSI	
Dispatch Location	BARTLESVILLE	Tubing		Rate	

Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401S	CEMENT PUMP (SURFACE PIPE)	1	2 HRS MAX	\$825.00	\$ 825.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	105	PER MILE	\$4.00	\$ 420.00
5407A	TON MILEAGE DELIVERY	350	PER MILE	\$1.34	\$ 469.00
5609	MISC PUMP (CEMENT TRUCK)	3	PER HOUR	\$200.00	\$ 600.00
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
5402	FOOTAGE	250	PER FOOT	0.22	\$ 55.00
EQUIPMENT TOTAL					\$ 2,369.00

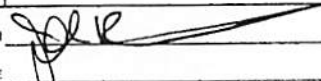
Cement, Chemicals and Water					
1126	OWC. CEMENT (CAL SEAL) 6%OWC. 2% CAL. CHLORIDE 2% GE	125	0	\$18.80	\$ 2,350.00
1107A	PHENOSEAL	40	0	\$1.29	\$ 51.60
1123	CITY WATER (PER 1000 GAL)	5	0	\$16.50	\$ 82.50
0		0	0	\$0.00	\$ -
0		0	0	\$0.00	\$ -
0		0	0	\$0.00	\$ -
0		0	0	\$0.00	\$ -
0		0	0	\$0.00	\$ -
0		0	0	\$0.00	\$ -
0		0	0	\$0.00	\$ -
CHEMICAL TOTAL					\$ 2,484.10


Water Transport					
5501C	WATER TRANSPORT (CEMENT)	10	TER TRANSPORT (CEME	\$112.00	\$ 1,120.00
0		0	0	\$0.00	\$ -
0		0	0	\$0.00	\$ -
TRANSPORT TOTAL					\$ 1,120.00

Cement Floating Equipment (TAXABLE)					
0	Cement Basket		0	\$0.00	\$ -
0	Centralizer		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Float Shoe		0	\$0.00	\$ -
0	Float Collars		0	\$0.00	\$ -
0	Guide Shoes		0	\$0.00	\$ -
0	Baffle and Flapper Plates		0	\$0.00	\$ -
0	Packer Shoes		0	\$0.00	\$ -
0	DV Tools		0	\$0.00	\$ -
0	Ball Valves, Swedges, Clamps, Misc.		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Plugs and Ball Sealers		0	\$0.00	\$ -
0	Downhole Tools		0	\$0.00	\$ -
CEMENT FLOATING EQUIPMENT TOTAL					\$ -

DRIVER NAME	
492	jake
551	matt mick
415 T90	james w

	SUB TOTAL	\$ 5,973.10
7.30%	SALES TAX	\$ 161.34
	TOTAL	\$ 6,154.44
10%	(-DISCOUNT)	\$ 615.44
	DISCOUNTED TOTAL	\$ 5,539.00

AUTHORIZATION 
DATE _____

TITLE _____
FOREMAN 

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.

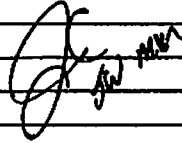
CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Endeavor	State, County	Sumner , Kansas	Cement Type	CLASS A
Customer Acct #	surface	Section	21	Excess (%)	100
Well No.	0	TWP	34s	Density	14.5
Mailing Address	Stalnaker 21-1A	RGE	2e	Water Required	0
City & State	0	Formation	0	Yield	1.45
Zip Code	0	Hole Size	13 1/2	Slurry Weight	0
Contact	0	Hole Depth	257	Slurry Volume	0
Email	0	Casing Size	10 3/4 INCH, 35	Displacement	23
Cell	0	Casing Depth	250	Displacement PSI	0
Office	0	Drill Pipe	0	MIX PSI	0
Dispatch Location	BARTLESVILLE	Tubing	0	Rate	0

REMARKS

Arrived on location at 12:30a.m. Rig still drilling hole. At 4pm hooked upto well ran 5bbls of fresh water and then 125sks of class a o.w.c. mix cement. Displaced with 23bbls of water and shut in. Had 12bbls of cement return to pit. Knocked loose and washed up.

SAFTY MEETING



Time:	Description	Rate (bpm)	Volume (bbl)	Pressure	Notes
	Arrive on location. Rig up. Safety Meeting.				
1st Stage	Pump Mud Clean	3	10	100	
	Pump H2O Spacer	3	10	100	
	Pump Cement	3	18.6	100	
	Shut down, wash pump and lines, drop Flex Wiper plug				
	Start Displace	3	3	0	
	Displace	7.5	125	400	
	Slow down to go thru dv tool and land plug	2.5	126	200	
	Land Plug and Float Held	2.5	153.6	900	
	Dropped opening bomb and loaded closing plug in head				
	Waited 15 min. And opened dv tool	1	5	900	
	Turned over to rig to circulate 4 hrs.				
2nd Stage	Pump Mud Clean	3	10	200	
	Pump H2O Spacer	3	10	200	
	Pump Cement	4	54	200	
	Shut down, wash pump and lines, drop Closing plug				
	Start Displace	3	3	200	
	Displacing	7	50	400	
	Displacing	7	90	700	
	Slow down to land plug	3	120	800	
	Land Plug	3	135.6	1500	
	Pressure up to close DV Tool	0.5		2000	
	Pressure up to close DV Tool	0.5		2500	
	Pressure up to close DV Tool	0.5		3000	
	DV Tool Closed Bled off pressure to make sure closed				

More Notes:

Closed head in on well at company man request.