



**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> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Becker Oil Corporation
Well Name	BACH 1
Doc ID	1137369

Tops

Name	Top	Datum
Cedar Hills SS	1138	(+1347)
Stone Corral Anhydrite	1642	(+843)
Wellington Group	2075	(+410)
Krider	2573	(-88)
Winfield	2637	(-152)
Heebner Shale	4034	(-1549)
Lansing Group	4090	(-1605)
BKC	4518	(-2033)
Marmaton Group`	4536	(2051)
Pawnee	4604	(-2119)
Ft. Scott	4659	(-2174)
Cherokee Shale	4689	(-2204)
Base Penn Ls.	4744	(-2259)
Miss. Erosional	4755	(-2270)
Miss. Solid	4770	(-2285)
TD (drlr)	4891	(-2406)
TD (log)	4890	(-2405)

ALLIED CEMENTING CO., LLC. 042355

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665

SERVICE POINT: Great Bend KS

Table with columns: DATE, DEC, MWR, HOURS, WELL #, LOCATION, JOB'S START, JOB FINISH, LEASE, OLD OR NEW, etc.

CONTRACTOR Pexsell Drilling #12 OWNER Becker Oil

TYPE OF JOB Surface CEMENT 165

HOLE SIZE 12 1/4 T.D. 264 AMOUNT ORDERED 175.00 Com 3%acc 2%gel

CASING SIZE 8 3/4 23# DEPTH 264.59

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG: 150+

PERFS.

DISPLACEMENT Fresh water

EQUIPMENT

PUMP TRUCK CEMENTER Bob G.

# 366 HELPER Dustin C.

BULK TRUCK

# 341 DRIVER Jan P.

BULK TRUCK

# DRIVER

REMARKS:

Rope on bottom break circulation with cement, mix 10% acc Com 3%acc 2%gel Displace with 15.50 bbls Fresh water and chut-in. Cement did circulate

Table with columns: COMMON, POZMIX, GEL, CHLORIDE, ASC, HANDLING, MILEAGE, TOTAL

SERVICE

Table with columns: DEPTH OF JOB, PUMP TRUCK CHARGE, EXTRA FOOTAGE, MILEAGE, MANIFOLD, LVM, TOTAL

CHARGE TO: Becker Oil STREET CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

Table with columns: TOTAL

To Allied Cementing Co., LLC. You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed.

PRINTED NAME Mike Kern SIGNATURE Mike Kern at 2:11

Table with columns: SALES TAX, TOTAL CHARGES, DISCOUNT, IF PAID IN 30 DAYS



**TRILOBITE TESTING, INC.**

# DRILL STEM TEST REPORT

Becker Oil Corporation  
 P.O. Box 1150  
 Ponca City OK, 74602  
 ATTN: Clyde

**11-24s-24w**

**Bach # 1**

Job Ticket: 45446

**DST#: 1**

Test Start: 2012.01.07 @ 12:50:00

## GENERAL INFORMATION:

Formation: **Lower Kinder**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 15:06:00

Time Test Ended: 20:39:30

Test Type: Conventional Bottom Hole (Initial)

Tester: Jace McKinney

Unit No: 46

Interval: **2570.00 ft (KB) To 2625.00 ft (KB) (TVD)**

Total Depth: 2625.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 2485.00 ft (KB)

2478.00 ft (CF)

KB to GR/CF: 7.00 ft

**Serial #: 8675**

**Inside**

Press @ Run Depth: 428.37 psig @ 2571.00 ft (KB)

Start Date: 2012.01.07

End Date:

2012.01.07

Start Time: 12:50:01

End Time:

20:39:30

Capacity: 8000.00 psig

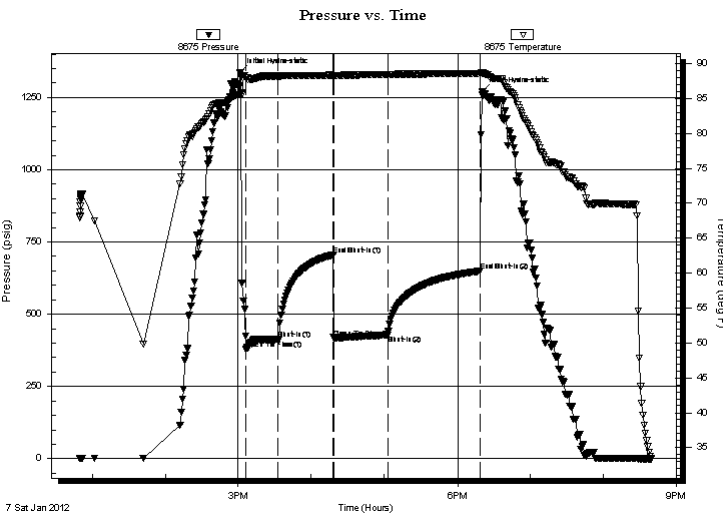
Last Calib.: 2012.01.07

Time On Btm: 2012.01.07 @ 15:01:30

Time Off Btm: 2012.01.07 @ 18:20:30

**TEST COMMENT:** B.O.B. in 1 min.  
 Bled off for 5 min. No return blow  
 Built to 5" blow  
 Bled off for 5 min. No return blow

## PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1336.88	85.59	Initial Hydro-static
5	378.08	87.93	Open To Flow (1)
32	413.17	88.18	Shut-In(1)
77	705.94	88.32	End Shut-In(1)
77	418.02	88.24	Open To Flow (2)
122	428.37	88.42	Shut-In(2)
197	649.26	88.60	End Shut-In(2)
199	1269.06	88.65	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
310.00	mcw 40%M 60%W	2.09
510.00	w cm 20%W 80%M	7.15

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE**  
**TESTING, INC.**

## DRILL STEM TEST REPORT

Becker Oil Corpoarition  
P.O. Box 1150  
Ponca City OK, 74602  
ATTN: Clyde

**11-24s-24w**  
**Bach # 1**  
Job Ticket: 45446 **DST#: 1**  
Test Start: 2012.01.07 @ 12:50:00

### GENERAL INFORMATION:

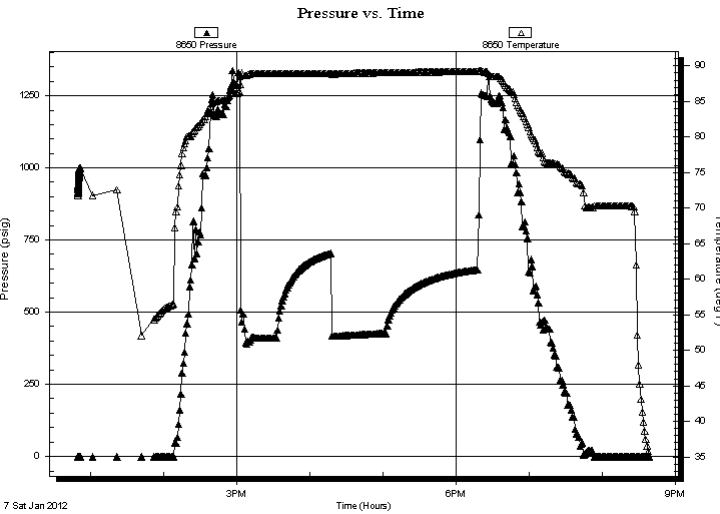
Formation: **Lower Kinder**  
Deviated: No Whipstock: ft (KB)  
Time Tool Opened: 15:06:00  
Time Test Ended: 20:39:30  
Interval: **2570.00 ft (KB) To 2625.00 ft (KB) (TVD)**  
Total Depth: 2625.00 ft (KB) (TVD)  
Hole Diameter: 7.88 inches Hole Condition: Fair  
Reference Elevations: 2485.00 ft (KB)  
2478.00 ft (CF)  
KB to GR/CF: 7.00 ft  
Test Type: Conventional Bottom Hole (Initial)  
Tester: Jace McKinney  
Unit No: 46

### Serial #: 8650

**Outside**

Press @RunDepth: psig @ 2571.00 ft (KB) Capacity: 8000.00 psig  
Start Date: 2012.01.07 End Date: 2012.01.07 Last Calib.: 2012.01.07  
Start Time: 12:50:01 End Time: 20:39:00 Time On Btm:  
Time Off Btm:

**TEST COMMENT:** B.O.B. in 1 min.  
Bled off for 5 min. No return blow  
Built to 5" blow  
Bled off for 5 min. No return blow



### PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

### Recovery

Length (ft)	Description	Volume (bbl)
310.00	mcw 40%M 60%W	2.09
510.00	w cm 20%W 80%M	7.15

### Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Becker Oil Corpoartion

**11-24s-24w**

P.O. Box 1150  
Ponca City OK, 74602

**Bach # 1**

Job Ticket: 45446

**DST#: 1**

ATTN: Clyde

Test Start: 2012.01.07 @ 12:50:00

## Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity: 100000 ppm

Viscosity: 29.00 sec/qt

Cushion Volume:

bbbl

Water Loss: in<sup>3</sup>

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 6300.00 ppm

Filter Cake: inches

## Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
310.00	mcw 40%M 60%W	2.087
510.00	w cm 20%W 80%M	7.154

Total Length: 820.00 ft      Total Volume: 9.241 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

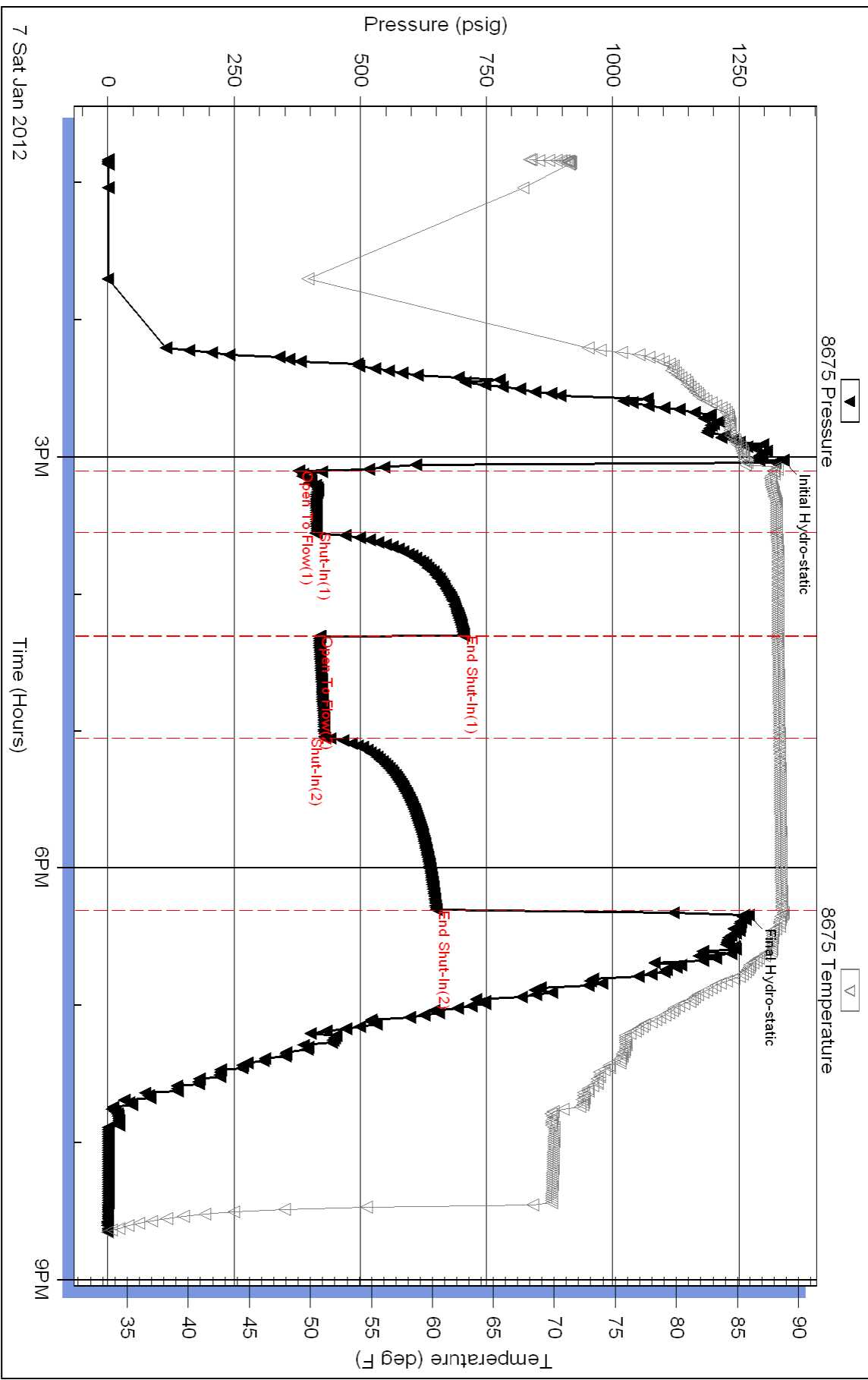
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: RW: .10 @ 55 F = 100,000

### Pressure vs. Time



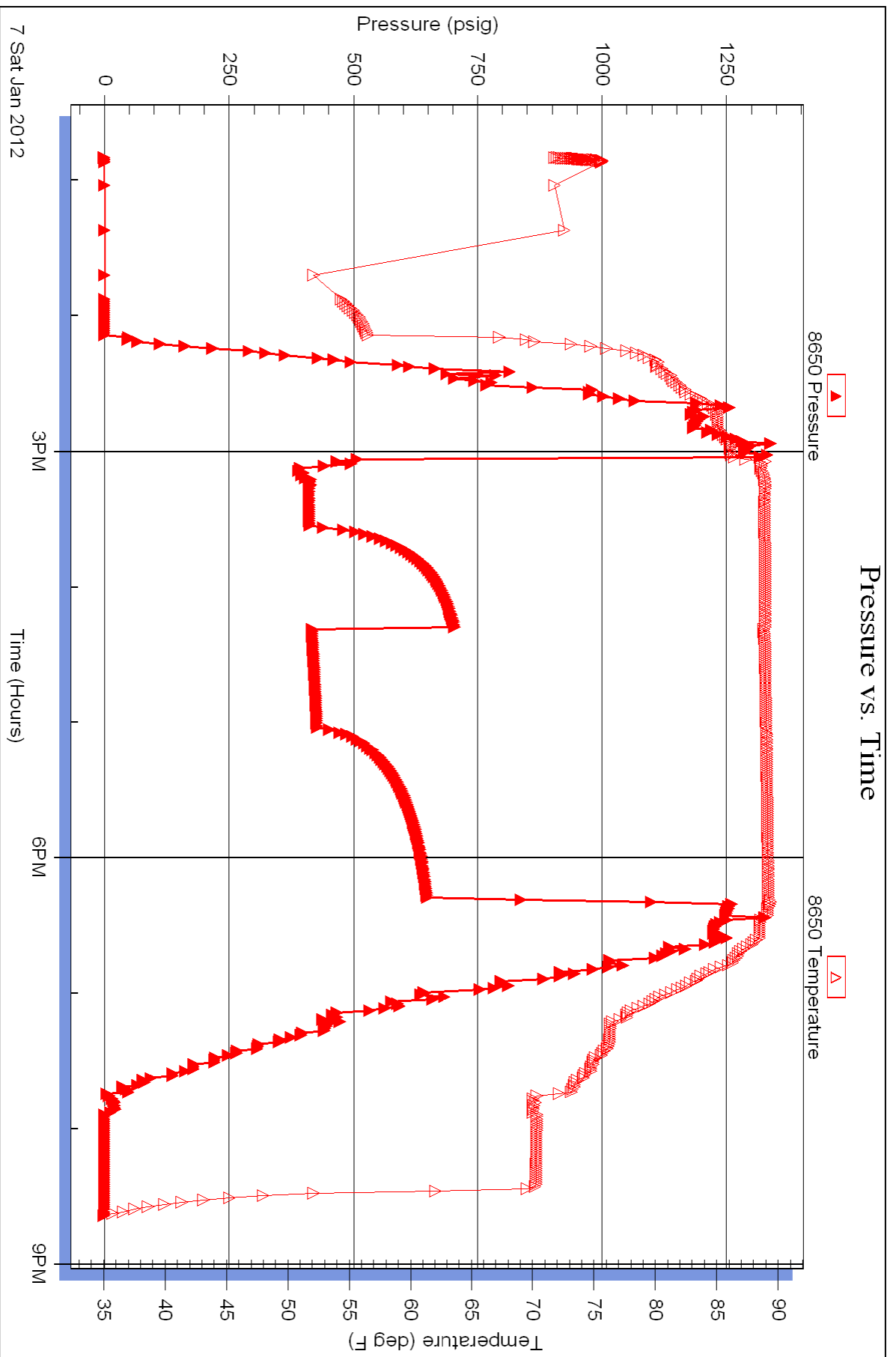


Serial #: 8650

Outside Becker Oil Corporation

Batch # 1

DST Test Number: 1



Triobite Testing, Inc

Ref. No: 45446

Printed: 2012.01.08 @ 08:55:05