



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: _____



1137749

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				

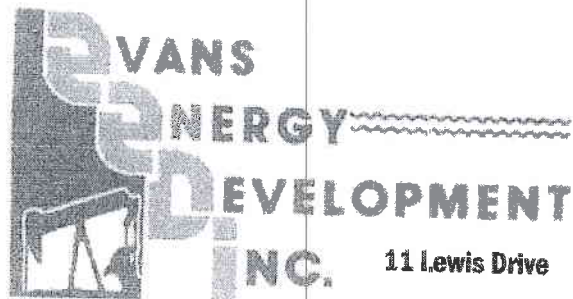
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
---	--	--



**EVANS
ENERGY
DEVELOPMENT
INC.**

11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

Phone: 913-557-9083
Fax: 913-557-9084

WELL LOG

L & P Enterprises, LLC

Donner #D11

API#15-121-29,460

February 28 - March 1, 2013

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
4	soil & clay	4
2	lime	6
7	shale	13
11	lime	24
12	shale	36
27	lime	63
1	shale	64
24	lime	88
90	shale	178
18	lime	196
33	shale	229
6	lime	235
36	shale	271
11	lime	282
16	shale	298
26	lime	324
7	shale	331
23	lime	354 oil show
4	shale	358
6	lime	364
2	shale	366
5	lime	371 base of the Kansas City
24	shale	395
3	oil sand	398 green & brown, good bleeding (gassy)
9	broken sand	407 brown & green, good bleeding (gassy)
5	silty shale	412
70	shale	482
7	oil sand	489 green, ok bleeding, few thin shale seams
53	shale	542
6	lime	548 oil show
7	shale	555
1	lime	556
21	shale	577
1	coal	578
5	shale	583
2	lime	585
5	shale	590
3	lime	593
12	shale	605
2	lime	607

3	shale	610
1	coal	611
12	shale	623
5	lime	628 broken lime
31	shale	659
3	broken sand	662 brown & green, good bleeding
3.5	oil sand	665.5 brown, good bleeding, few thin shale seams
1.5	broken sand	667 brown & green shale, good bleeding
1.5	oil sand	668.5 brown, good bleeding
0.5	shale	669
2.5	broken sand	671.5 50% brown sand, 50% green shale, good bleeding (gassy)
0.5	lime	672
1	shale	673
2.5	broken sand	675.5 brown & green, ok bleeding
0.5	shale	676
1	broken sand	677 30% brown sand, 70% shale, ok bleeding
7	silty shale	684
39	shale	723
1	lime	724
15	shale	739 TD

Drilled a 9 7/8" hole to 22.2'

Drilled a 5 5/8" hole to 739'

Set 22.2' of 7" surface casing cemented with 6 sacks of cement

Set 728.8' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp

	Core Times	
	<u>Minutes</u>	<u>Seconds</u>
659	1	23
660	1	5
661		54
662	1	2
663	1	3
664		54
665	1	24
666		58
667	1	4
668		45
669		47
670	1	2
671	1	40
672		52
673		53
674		52
675		54
676		49
677	1	6
678		35



CONSOLIDATED
Oil Well Services, LLC

257249

TICKET NUMBER 38860

LOCATION Ottawa KS

FOREMAN Fred Madu

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
3/1/13	4828	Danner # D-11	NW 5	17	22	M1
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
L+P Enterprises LLC			506	Fred Madu	Satef	MJ
MAILING ADDRESS			495	Harv Bee	HB	
29975 Indianapolis Rd			369	Bremon	BK	
CITY	STATE	ZIP CODE	548	Mikhaa	MH	
Paola	KS		JOB TYPE <u>Long string</u>			
			HOLE SIZE <u>5 7/8</u>		HOLE DEPTH <u>239'</u>	
			DRILL PIPE		TUBING	
			SLURRY WEIGHT		SLURRY VOL	
			DISPLACEMENT <u>4.23 BBL</u>		DISPLACEMENT PSI	
			WATER gal/sk		CEMENT LEFT In CASING <u>2 1/2" Plug</u>	
			MIX PSI		RATE <u>5 BPM</u>	

REMARKS: Check casing depth w/ wireline. Hold crew meetings. Establish pump rate. Mix + Pump 100# Gal flush. Mix + Pump 103 SKS 50/50 low mix cement 270 Gal. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to 800# PSI. Release pressure to set float valve. Shut in casing.

Evans Energy Dev. Inc. - Mitchell.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		
5406	-	MILEAGE	495	1030 ⁰⁰
5402	728'	Casing footage		N/C
5407	1/2 Minimum	Ten Miles		N/C
5502C	2 hrs	80 BBL Vac Truck	548	175 ⁰⁰
			369	180 ⁰⁰
1124	103 SKS	50/50 Low Mix Cement		1127 ⁸⁵
1118B	273#	Premium Gel		57 ⁸³
4402	1	2 1/2" Rubber Plug		28 ⁰⁰
			7.55%	SALES TAX
				ESTIMATED TOTAL
				9159
				268977

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 for