



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
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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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Wolfe, Robert & Debbie S. dba Lone Wolf Oil
Well Name	Reeves A1
Doc ID	1142236

Tops

Name	Top	Datum
Iola	1454	-274
Layton	1474	-294
Kansas City	1619	-439
Altamont	1828	-648
Ft. Scott	1959	-779
Mississippi Chat	2272	-1092
Mississippi	2276	-1096
Kinderhook	2568	-1388
Arbuckle	2624	-1444



**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 41181

LOCATION Eureka KS

FOREMAN Shannon Felk

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT** API # 15-049 22576

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-14-13	4163	Reeves # A1	16	315	9E	EIK
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Lone Wolf Oil Co			445	Dave G		
MAILING ADDRESS			479	Merle R.		
P.O. Box 241						
CITY	STATE	ZIP CODE				
Moline	KS	67353				

JOB TYPE S/P HOLE SIZE 12 1/4" HOLE DEPTH 54' CASING SIZE & WEIGHT 8 5/8"  
 CASING DEPTH 44' 6.2 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.5-15# SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 10-15'  
 DISPLACEMENT 2.5 Bbl DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5BPM

REMARKS: Safety Meeting, Rig up to 8 5/8" casing, Break circulation w/ 3 Bbl water. Mixed 40 SKS Class "A" cement with 3% calcium, 2% gel. displace with 2 1/2 Bbl water & shut casing in. Good circulation @ all times 4 Bbl slurry to pit. Job complete

!! Thanks Shannon & Crew !!

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	40	MILEAGE	4.00	160.00
11045	40 SKS	Class "A" Cement	14.95	598.00
1102	120 #	Calcium @ 3%	.74	88.80
1118B	80 #	gel @ 2%	.21	16.80
5407	1.88 Tons	Ton mileage bulk Truck	m/c	350.00
			Sub Total	2038.60
			7.30% SALES TAX	51.36
			ESTIMATED TOTAL	2089.96

Ravin 3737

855941

AUTHORIZATION

Cotton

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





**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 41201

LOCATION EUREKA

FOREMAN Rick Ledford

Kevin McCoy

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT** API 15-049-22576

Stage #1

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																				
1-19-13	4763	Reeves # A1	16	315	9E	ELK, KS																				
CUSTOMER <u>Lone Wolf Oil Co.</u>			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>520</td> <td>John S.</td> <td></td> <td></td> </tr> <tr> <td>667</td> <td>CHRIS B.</td> <td></td> <td></td> </tr> <tr> <td>611</td> <td>Joey K.</td> <td></td> <td></td> </tr> <tr> <td>637</td> <td>Jim M.</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	520	John S.			667	CHRIS B.			611	Joey K.			637	Jim M.		
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611	Joey K.																									
637	Jim M.																									
MAILING ADDRESS <u>Box 241</u>																										
CITY <u>Moline</u>	STATE <u>Ks</u>	ZIP CODE <u>67353</u>																								
C & G DR19. R191																										

JOB TYPE Longstring 0 HOLE SIZE 7 7/8 HOLE DEPTH 2707' K.B. CASING SIZE & WEIGHT 5 1/2 15.50" New  
 CASING DEPTH 2647' K.B. DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.6\* SLURRY VOL 42 BBL WATER gal/sk 9.0 CEMENT LEFT in CASING 12'  
 DISPLACEMENT 70.7 DISPLACEMENT PSI 900 MIX PSI 300 RATE 5 BPM

REMARKS: Safety Meeting: TD 2707' K.B. 5 1/2 CASING w/ DV Tool & Packer Shoe, w/ Landing Sub Set @ 2647'. DV Tool @ 1802' Below K.B. Circulate w/ Mud Pump for 45 minutes. Rig up 5 1/2 Cement Head. Drop Brass BALL. Pressure 5 1/2 to 1000 PSI to Set Packer Shoe. Pressure fell off to 300 PSI. Pump 10 BBL water ahead. Mixed & Pumped 125 SKS Thick Set Cement w/ 5\* Kol-Seal /sk @ 13.6\*/gal = 42 BBL Slurry. Shut down. Wash out Pump & Lines. Release 5 1/2 Catch down Flex Plug. (5 1/2 Casing Vol. to PBTD = 62.7 BBL) Displace w/ 62.7 BBL water @ 900 PSI Plug did not Land. Pump Additional 4 BBL water still did not Land. Pump another 4 BBL still did not Land. Rig up Mud Pump to 5 1/2. Circulate most of Cement Slurry back to Pit. RAN w/ Line tag Plug @ 2639'. Pump another Flex Plug follow w/ wire line. Plug stopped @ 2638'. FIAG hole in 5 1/2 w/ wire line @ 2635' @ 3.5 BPM @ 300 PSI w/ 900 Fluid Returns to SURFACE on ANNULUS of 5 1/2. CALL for another 125 SKS Tail Cement. See Ticket # 41202

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
		MILEAGE		
1126 A	125 SKS	THICK Set Cement	19.20	2400.00
1110 A	625*	Kol-Seal 5*/sk	.46*	287.50
1107 A	125*	PhenoSeal 1*/sk	1.29*	161.25
5407 A	6.87 TONS	TON Mileage Bulk Delv.	1.34	322.20
5502 C	5 HRS	80 BBL VAC TRUCK	90.00	450.00
4277	1	5 1/2 DV Tool w/ Plugs	3220.00	3220.00
4253	1	5 1/2 Type "A" Packer Shoe	1584.00	1584.00
		Sub Total		9454.95
		SALES TAX 7.3%		558.65
		ESTIMATED TOTAL		10,013.60

THANK YOU

7.3%

Ravin 3737

AUTHORIZATION

John Wells

TITLE

2562224

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.





**CONSOLIDATED**  
Oil Well Services, LLC

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

Stage **ENTERED**  
FINAL Cementing Procedure

**FIELD TICKET & TREATMENT REPORT**

TICKET NUMBER 41202

LOCATION EUREKA

FOREMAN Rick Ledford

Kevin McCoy

CEMENT API # 15-049-22576

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-19-13	4763	Reeves # A1	16	315	9E	ELK Ks
CUSTOMER Lone Wolf Oil Co.			C & G DR19. R19 1			
MAILING ADDRESS Box 241			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Moline			520	John S.		
STATE KS	ZIP CODE 67353		667	CHRIS B.		
			611	JOEY K.		
			637	JIM M.		

JOB TYPE Longstring 0 HOLE SIZE 7 7/8 HOLE DEPTH 2707' K.B. CASING SIZE & WEIGHT 5 1/2 15.50 \* New  
 CASING DEPTH 2647' K.B. DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 12.6 - 13.6 \* SLURRY VOL 40 BBL 94 BBL WATER gal/sk 9.0 CEMENT LEFT in CASING 145' +/-  
 DISPLACEMENT 60 BBL DISPLACEMENT PSI 1950 ~~PSI~~ 1000 shut in RATE \_\_\_\_\_

REMARKS: Safety Meeting: Refer back to Ticket #41201. TD 2707' K.B. 5 1/2 casing w/ DV Tool, Packer Shoe & Landing Sub Set @ 2647' K.B. (Hole or Split in 5 1/2 @ 2635') Rig up to Recement 5 1/2 from 2635' to Surface in Single Stage. Break Circulation w/ 5 BBL fresh water. Mixed 265 SKS 60/40 Pozmix Cement w/ 8% Gel, 1" PhenoSeal/sk @ 12.6\*/gal = 88 BBL slurry, Tail in w/ 125 SKS Thick Set Cement @ 13.6\*/gal = 40 BBL slurry. Shut down. Wash out Pump & Lines. Release 5 1/2 flex Plug. Displace w/ 60 BBL fresh water. Final Pumping Pressure 1950 PSI. 15IP 1000 PSI. Shut 5 1/2 in @ 1000 PSI. Displace Plug to ~ 2510'. Good Cement Returns to Surface = 20 BBL slurry to Pit. Note: Plug Rate Hole w/ 20 SKS 60/40 Pozmix Cement. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	35	MILEAGE	4.00	140.00
1126 A	125 SKS	THICK Set Cement - TAIL Cement	19.20	2400.00
1131	285 SKS	60/40 Pozmix Cement	12.55	3576.75
1118 B	1950 *	Gel 8% } Lead Cement	.21 *	409.50
1107 A	285 *	PhenoSeal 1"/sk	1.29 *	367.65
5407A	19.13 TONS	Ton Mileage Bulk Delv	1.34	897.20
5502 C	4 Hrs	80 BBL VAC TRUCK	90.00	360.00
1123	3000 gals	City water	16.50/1000	49.50
4104	2	5 1/2 Cement BASKET	229.00	458.00
4130	10	5 1/2 x 7 7/8 CENTRALIZERS	48.00	480.00
4310	2	5 1/2 Stop Rings	30.00	60.00
			Sub Total	10,228.60
		THANK YOU	7.3%	SALES TAX
				ESTIMATED TOTAL
				10,798.09

Ravin 3737

AUTHORIZATION [Signature]

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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