



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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ALLIED OIL & GAS SERVICES, LLC 060837

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Baker

DATE <i>5-17-13</i>	SEC. <i>28</i>	TWP. <i>9S</i>	RANGE <i>25W</i>	CALLED OUT	ON LOCATION	JOB START <i>8:00 PM</i>	JOB FINISH <i>8:30 AM</i>
LEASE <i>Robledor</i>	WELL # <i>5</i>	LOCATION <i>ST Peter 3N 2W N4E 12</i>			COUNTY <i>Graham</i>	STATE <i>KS</i>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR *INTEGRITY #7*

TYPE OF JOB *Surface*

HOLE SIZE <i>12 1/4</i>	T.D. <i>260</i>
CASING SIZE <i>8 7/8</i>	DEPTH <i>255.80</i>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <i>15'</i>	
PERFS.	
DISPLACEMENT <i>15.33 BOL</i>	

EQUIPMENT

OWNER *SGMB*

CEMENT

AMOUNT ORDERED *160 sks com 380cc*

290 gal

COMMON	<i>160 sks</i>	@ <i>17.90</i>	<i>2864.00</i>
POZMIX		@	
GEL	<i>3 sks</i>	@ <i>23.40</i>	<i>70.20</i>
CHLORIDE	<i>6 sks</i>	@ <i>64.00</i>	<i>384.00</i>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	

PUMP TRUCK CEMENTER *Andrew Fordlund*

431 HELPER *Dane Retzlaff*

BULK TRUCK DRIVER *Kevin Ryan*

342 DRIVER

BULK TRUCK DRIVER

HANDLING *173.01 @ 2.48 = 429.06*

MILEAGE *2.60 @ 75 mile = 195.00*

TOTAL *4834.50*

REMARKS:

Cement Did Circulate

Thank you

CHARGE TO: *Texkon exploration*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<i>255.80</i>		
PUMP TRUCK CHARGE			<i>1512.25</i>
EXTRA FOOTAGE		@	
MILEAGE <i>50 miles</i>		@ <i>2.20</i>	<i>110.00</i>
MANIFOLD		@	
<i>Light vehicle</i>		@ <i>4.40</i>	<i>223.20</i>
		@	

TOTAL *2153.55*

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL			

To: Allied Oil & Gas Services, 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. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME *Todd E. Mersch*

SIGNATURE *Todd E. Mersch*

SALES TAX (if Any) _____

TOTAL CHARGES *6,988.05*

DISCOUNT *1,467.49* IF PAID IN 30 DAYS

5,520.55 Net.

ALLIED OIL & GAS SERVICES, LLC 060299

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Oakley

DATE <u>5/22/13</u>	SEC. <u>28</u>	TWP. <u>9</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION	JOB START <u>9:30 Am</u>	JOB FINISH <u>11:00 Am</u>
LEASE <u>Rohleder</u>		WELL # <u>5</u>		LOCATION <u>St Peter 3N-2W-N1E</u>		COUNTY <u>Graham</u>	STATE <u>Ko.</u>
OLD OR <u>NEW</u> (Circle one)				into			

CONTRACTOR Integrity 7
 TYPE OF JOB Production 2 stage
 HOLE SIZE 7 7/8 T.D. 4150
 CASING SIZE 5 1/2 DEPTH 4142'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DV Tool DEPTH 2137'
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT 38.37
 CEMENT LEFT IN CSG. 38.37
 PERFS.
 DISPLACEMENT 97.97

OWNER Same
 CEMENT
 AMOUNT ORDERED 110 SKS 12 3/4 S.H 2 1/2 G. 1
5" Gilsomite
525 SKS ALLW 1/4" Floseal

EQUIPMENT

PUMP TRUCK CEMENTER Dawn Pascoe
 # 120 HELPER Tyler Flipse
 BULK TRUCK
 # 600 DRIVER Kevin Ryan
 BULK TRUCK
 # 566-595 DRIVER Brandon Wilkinson

COMMON <u>ALLW</u>	@	\$ <u>15.92</u>	
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC <u>110 SKS</u>	@	\$ <u>20.92</u>	\$ <u>2299.00</u>
<u>Salt 12 SKS</u>	@	\$ <u>26.35</u>	\$ <u>316.20</u>
<u>Gilsomite 550 *</u>	@	\$ <u>.78</u>	\$ <u>539.00</u>
<u>Floseal 181 *</u>	@	\$ <u>2.72</u>	\$ <u>399.00</u>
	@		
	@		
<u>Super Flush 20 bbl</u>	@	\$ <u>58.72</u>	\$ <u>1174.00</u>
	@		
HANDLING <u>734.79</u> @ <u>1x</u>	@	\$ <u>2.48</u>	\$ <u>1872.28</u>
MILEAGE <u>30.59 x 53 x</u>	@	\$ <u>2.60</u>	\$ <u>4215.00</u>
TOTAL			<u>1</u>

REMARKS:
Super Flush Pump water
Pump 101 - mix 10 - Pump 101
12 - mix 110 SKS HSC Cement
Displace Plug Load @ 1000' Lift 300'
Open DV Tool 900' Circulate 30 min
Plug Bottle 32 SKS Cement
mix SKS Cement in Casing Displace
with water Load Plug Lift
Flux Hold Cement Did Circulate
 Thank You.

SERVICE

DEPTH OF JOB <u>4142'</u>	
PUMP TRUCK CHARGE	\$ <u>2765.75</u>
EXTRA FOOTAGE <u>Top Stage</u>	\$ <u>2406.25</u>
MILEAGE <u>53</u>	@ \$ <u>7.70</u> \$ <u>408.10</u>
MANIFOLD <u>Head</u>	@ \$ <u>275.00</u>
<u>LV mileage</u>	@ \$ <u>4.40</u> \$ <u>233.20</u>
	@
TOTAL	

CHARGE TO: Tex Kan Exploration LLC
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>5/8 Weatherford</u>	
<u>1 DV Tool</u>	@ \$ <u>5335.26</u>
<u>20 Spiralizers</u>	@ \$ <u>147.25</u> \$ <u>2955.00</u>
<u>40-look Rings</u>	@ \$ <u>48.14</u> \$ <u>1925.60</u>
<u>2 Centralizers</u>	@ \$ <u>57.33</u> \$ <u>114.66</u>
<u>1-HFU Float Shoe</u>	@ \$ <u>408.33</u>
<u>1 Latch Down Plug Assy</u>	\$ <u>324.00</u>
TOTAL	

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SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____
 SIGNATURE [Signature]