



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: _____



1147818

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Johnson County, KS
 Well: Mackey 2
 Lease Owner: DE Exploration

Town Oilfield Service, Inc.
 (913) 837-8400

Commenced Spudding:
 4/4/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-11	Soil-Clay	11
5	Sandy Clay	16
10	Sandy Shale	26
32	Shale	58
7	Lime	65
5	Shale	70
14	Lime	84
8	Shale	92
9	Lime	101
8	Shale	109
16	Lime	125
19	Shale	144
17	Lime	161
9	Shale	170
55	Lime	225
23	Shale	248
8	Lime	256
17	Shale	273
8	Lime	281
4	Shale	285
9	Lime	294
34	Shale	328
1	Lime	329
11	Shale	340
26	Lime	366
8	Shale	374
21	Lime	395
4	Shale	399
6	Lime	405
4	Shale	409
6	Lime	415
65	Shale	480
44	Sandy Shale	524
6	Shale	530
9	Sand	539
50	Shale	589
5	Lime	594
11	Shale	605
5	Lime	610
17	Shale	627

Short Cuts

TANK CAPACITY

BBLs. (42 gal.) equals $D^2 \times 14 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

- * D - Diameter of Pump Sheave
- * d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

$$\text{BELT LENGTH} = 2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$$

* Need these to figure belt length

$$\text{TO FIGURE AMPS: } \frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$$

746 WATTS equal 1 HP

Log Book

Well No. 2

Farm Mickey

KS Johnson
(State) (County)

28 14 22
(Section) (Township) (Range)

For D.E. Explosion
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Mackey Farm: Johnson County
ES State; Well No. 2
 Elevation 1046
 Commenced Spuding April 4 20 13
 Finished Drilling April 5 20 13
 Driller's Name Wesley Dollard
 Driller's Name _____
 Driller's Name _____
 Tool Dresser's Name Greg Perry
 Tool Dresser's Name Colt Stone
 Tool Dresser's Name _____
 Contractor's Name TOS
28 14 22

(Section) (Township) (Range)
 Distance from S line, 3060 ft.
 Distance from E line, 400 ft.

3 sacks
 1 case
 13 hrs

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
 8" Set _____ 8" Pulled _____
 7 3/4" Set 22 6 1/4" Pulled _____
 4" Set _____ 4" Pulled _____
 2" Set _____ 2" Pulled _____

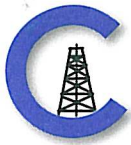
CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
867.	31	seat	ripple		
898.	51	Baffle			
931.	06	Plat			
					27/8

Thickness of Strata	Formation	Total Depth	Remarks
0-11	soil-clay	11	
5	sandy clay	16	
10	sandy shale	26	
32	shale	58	
7	lime	65	
5	shale	70	
14	lime	84	
8	shale	92	
9	lime	101	
8	shale	109	
16	lime	125	
19	shale & redbed	144	
17	lime	161	
9	shale	170	
55	lime	225	
23	shale	248	
8	lime	256	
17	shale	273	
8	lime	281	
4	shale	285	
9	lime	294	
34	shale	328	
1	lime	329	
11	shale	340	
26	lime	366	
8	shale	374	
21	lime	395	

395

Thickness of Strata	Formation	Total Depth	Remarks
4	shale	399	
6	lime	405	
4	shale	409	
6	lime	415	Heating
65	shale	480	
44	sandy shale	524	
6	shale & lime	530	
9	sand	539	grey - no oil
50	shale	589	
5	lime	594	
11	shale	605	
5	lime	610	
17	shale	627	
3	lime	630	
8	shale	638	
3	lime	641	
3	shale	644	
3	lime	647	
104	shale	751	
10	broken sand	761	odor - slight show
10	sandy shale	771	
87	shale	858	
3	sand	861	no oil
11	shale	872	
1	sand	873	broken - 10% oil
15	core	888	
72	sandy shale	960	JD



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 257877

Invoice Date: 04/09/2013 Terms: 0/0/30,n/30

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D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

MACKEY #2
38697
28-14-22
04-05-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	126.00	10.9500	1379.70
1118B	PREMIUM GEL / BENTONITE	312.00	.2100	65.52
1111	SODIUM CHLORIDE (GRANULA	244.00	.3700	90.28
1110A	KOL SEAL (50# BAG)	630.00	.4600	289.80
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
495 CASING FOOTAGE	931.00	.00	.00
548 MIN. BULK DELIVERY	1.00	350.00	350.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00

Parts:	1876.93	Freight:	.00	Tax:	141.24	AR	3743.17
Labor:	.00	Misc:	.00	Total:	3743.17		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

257877

TICKET NUMBER 38697
LOCATION Ottawa KS
FOREMAN Fred Mader

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
4/5/13	2355	Mackey #2	NF 28	14	22	JO
CUSTOMER D-E Exploration			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 128			712	Fred Mad	Safety Mtg	
CITY STATE ZIP CODE Wellsville KS 66092			495	Har Boc	HB	
			675	Ki Dax	KD	
			548	Mik Haa	MH	

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 960 CASING SIZE & WEIGHT 2 7/8 EUE
CASING DEPTH 931 DRILL PIPE Baffle in TUBING @ 900 OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2' Plug + 31'
DISPLACEMENT 5.23 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5BPM

REMARKS: Hold crew meeting. Establish pump rate. Mix + Pump 1/2 Gal Polymer Flush. Circulate to condition hole. Mix + Pump 100# Gal Flush. Mix + Pump 126 sks 50/50 Por Mix Cement 2% Gel 5% Salt 5" Kol Seal/sk. Cement to Surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to Baffle in casing. Pressure to 800# PSI. Release pressure to set float valve. Shift in casing

TOS Drilling. Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	30 mi	MILEAGE	495	120 ⁰⁰
5402	931	Casing Footage		N/C
5407	Minimum	Ton Miles		350 ⁰⁰
5508C	2 1/2 hrs	80 BBL Vac Truck		225 ⁰⁰
1124	126 sks	50/50 Por Mix Cement		1399 ⁷⁰
1118B	312 [#]	Premium Gel		65 ⁵²
1111	244 [#]	Granulated Salt		90 ²⁸
1110A	630 [#]	Kol Seal		289 ⁸⁰
4402	1	2 1/2" Rubber plug		26 ⁰⁰
1401B	1/2 Gal	Polymer - HE-100		23 ⁶³
			7.525%	SALES TAX
				ESTIMATED
				TOTAL

Completed

Ravin 3737 Doug Evans Left/would not sign SALES TAX ESTIMATED TOTAL 141²⁴
3743¹⁷

AUTHORIZATION No Co. Rep on Site. 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.