



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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Johnson County, KS
 Well: Mackey I-9
 Lease Owner: DE Exploration

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

Commenced Spudding:
 5/29/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
6	Soil-Clay	6
14	Sandstone	20
5	Shale	25
7	Sand and Sandy Shale	32
2	Lime	34
16	Shale	50
5	Lime	55
4	Shale	59
17	Lime	76
9	Shale	85
8	Lime	93
9	Sand and Sandy Shale	102
16	Lime	118
12	Shale	130
5	Sand and Sandy Shale	135
18	Lime	153
10	Sandy Shale	163
57	Lime	220
21	Shale	241
7	Lime	248
20	Shale	268
7	Lime	275
4	Shale	279
8	Lime	287
34	Shale	321
1	Lime	322
11	Shale	333
28	Lime	361
6	Shale	367
23	Lime	390
4	Shale	394
4	Lime	398
5	Shale	403
7	Lime	410
5	Shale	415
7	Sand	422
7	Sandy Shale	429
91	Shale	520
8	Sand	528
54	Shale	582

Short Cuts

TANK CAPACITY

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

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals $BPH \times PSI \times .0004$

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 $SPM \times d$

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

* Need these to figure belt length

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

746 WATTS equal 1 HP

Log Book

Well No. 1-4

Farm Mackay

KS Johnson
(State) (County)

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

For D.E. Exploration
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East
Louisburg, KS 66053
913-710-5400

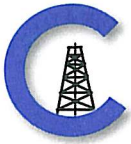
Thickness of Strata	Formation	Total Depth	Remarks
6	soil / clay	6	
14	sandstone	20	
5	shale	25	
7	sand + sand shale	32	
2	Lime	34	
16	shale	50	
5	Lime	55	
4	shale	59	
17	Lime	76	
9	shale	85	
8	Lime	93	
9	sandy shale + sand	102	
16	Lime	118	
12	shale	130	
5	sand + sandy shale	135	
18	Lime	153	
10	sandy shale	163	
57	Lime	220	
21	shale	241	
7	Lime	248	
20	shale	268	
7	Lime	275	
4	shale	279	
8	Lime	287	
34	shale	321	
1	Lime	322	
11	shale	333	

333

Thickness of Strata	Formation	Total Depth	Remarks
28	Lime	361	
6	shale	367	
23	Lime	390	
4	shale	394	
4	lime	398	
5	shale	403	
7	Lime	410	Heather
5	shale	415	
7	sand	422	grey
7	sandy shale	429	
91	shale	520	
8	sand	528	grey
54	shale	582	
5	Lime	587	
6	shale	593	
2	Lime	595	
6	shale	601	
6	Lime	607	
6	sand & sandy shale	613	
11	shale	624	
3	Lime	627	
7	shale	634	
4	Lime	638	
4	shale	642	
3	Lime	645	
29	shale	674	650' red bed
2	Lime	676	

676

Thickness of Strata	Formation	Total Depth	Remarks
3	shale	679	
2	Lime	681	
10	sand	691	grey
10	sandy shale	701	
47	shale	748	
6	Broken sand	754	odor, little oil
6	sandy shale	760	
19	shale	779	
4	limest shale	783	
5	shale	788	
6	sandy shale	794	
68	shale	862	
2	Broken sand	864	
2	sandy Lime	866	with oil, odor
6	sand	872	oil sandy, with bleeding
2	Broken sand	874	with oil
4	sandy shale	878	no oil
6	sand	884	no oil
76	shale	960	TD



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 # 259348

Invoice Date: 06/10/2013 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 I-9
41900
28-14-22
06-04-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	117.00	11.5000	1345.50
1118B	PREMIUM GEL / BENTONITE	297.00	.2200	65.34
1111	SODIUM CHLORIDE (GRANULA	246.00	.3900	95.94
1110A	KOL SEAL (50# BAG)	585.00	.4600	269.10
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50
1401	HE 100 POLYMER	.50	47.2500	23.63

Description	Hours	Unit Price	Total
510 MIN. BULK DELIVERY	1.00	368.00	368.00
666 CEMENT PUMP	1.00	1085.00	1085.00
666 EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
666 CASING FOOTAGE	922.00	.00	.00

Parts:	1829.01	Freight:	.00	Tax:	137.64	AR	3419.65
Labor:	.00	Misc:	.00	Total:	3419.65		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 PONCA CITY, OK 580/762-2303 OAKLEY, KS 785/672-8822 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 GILLETTE, WY 307/686-4914 CUSHING, OK 918/225-2650

