



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: _____



1149287

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Johnson County, KS
Well: Thomas A-1
Lease Owner: ST Petroleum

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

Commenced Spudding:
9/30/2011

WELL LOG

Thickness of Strata	Formation	Total Depth
0-15	Soil/Clay	15
13	Shale	28
27	Lime	55
11	Shale	66
8	Lime	74
7	Shale	81
21	Lime	102
14	Shale	116
25	Lime	141
5	Shale	146
53	Lime	199
19	Shale	218
9	Lime	227
20	Shale	247
6	Lime	253
6	Shale	259
8	Lime	267
44	Shale	311
24	Lime	335
6	Shale	341
28	Lime	369
2	Shale	371
5	Lime	376
5	Shale	381
6	Lime	387
181	Shale	568
15	Lime	583
12	Shale	595
5	Lime	600
4	Shale	604
9	Lime	613
23	Shale	636
5	Lime	641
75	Shale	714
10	Sand	724
113	Shale	837
2	Sand	839
5	Sand	844
74	Shale	918-TD

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 $BPH \times PSI \times .0004$

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-A

Farm Thomas A

KS
(State)

Johnson
(County)

29
(Section)

14
(Township)

22
(Range)

For ST Petroleum inc
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Thickness of Strata	Formation	Total Depth	Remarks
0-26	Soil-clay	26	
9	Shale	35	
8	Lime	43	
4	Shale	47	
15	Lime	62	
11	Shale	73	
8	Lime	81	
7	Shale	88	
20	Lime	108	
18	Shale	126	
21	Lime	147	
6	Shale	153	
53	Lime	206	
19	Shale	225	
9	Lime	234	
7	Shale	241	
2	sandy lime	243	
7	sand	250	
3	Shale	253	grey - no oil
6	Lime	259	
7	Shale	266	
7	Lime	273	
33	Shale	306	
2	Lime	308	
9	Shale	317	
25	Lime	342	
8	Shale	350	

350

Thickness of Strata	Formation	Total Depth	Remarks
24	Lime	374	
4	shale	378	
3	Lime	381	
5	shale	386	
7	Lime	393	
29	shale	422	Herthq
18	sand	440	no Oil
73	shale	513	
7	sand	520	no Oil
46	shale	566	
3	Lime	569	
12	shale	581	
6	Lime	587	
15	shale	602	
3	Lime	605	
5	shale	610	
5	Lime	615	
46	shale	661	
6	sand	667	no Oil
56	shale	723	
10	sand & slate	733	odor - slight slow
6	sandy shale	739	
105	shale	844	
3	sand	847	no Oil
8	sand	855	good show - perf
65	sandy shale	920	TD



CONSOLIDATED
Oil Well Services, LLC

259552

TICKET NUMBER 41987

LOCATION Ottawa KS

FOREMAN Fred Maden

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8678

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-11-13	7532	Thomas # 1-A	NE 29	14	22	JO
CUSTOMER			TRUCK #			
ST Petroleum			712	Driver	TRUCK #	DRIVER
MAILING ADDRESS			495	Har Bor		
18800 Sunflower			369	Dor Mas		
CITY		STATE	ZIP CODE	510	Sat Tuc	
Edgerton		KS	66028			

JOB TYPE Longstring HOLE SIZE _____ HOLE DEPTH 920 CASING SIZE & WEIGHT 2 1/2 EUF
 CASING DEPTH 894 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 2 1/2" Ply
 DISPLACEMENT 5.2 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Hold crew meeting. Establish pump rate. Mix + Pump 100# Gel Flush. Mix + Pump 116 SKS 50/50 Poz Mix Cement 2% Gel 74# Flo Seal/sk. 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.

Fred Maden

TOS Drilling. Wesley Dallard

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 ⁰⁰
5406	30 mi	MILEAGE	495	126 ⁰⁰
5402	894	Casing Footage		N/C
5407	Minimum	Ten Miles	510	368 ⁰⁰
5502C	2 hr	80 BBL Vac Truck	369	180 ⁰⁰
1124	116 SKS	50/50 Poz Mix Cement		1334 ⁰⁰
118B	295#	Premium Gel		649 ⁰⁰
1107	29#	Flo Seal		71 ⁶³
4402	1	2 1/2" Rubber Plug		29 ⁵⁰
			7.525%	SALES TAX
				ESTIMATED TOTAL
				11287
				3371 ⁹⁰

Form 3737

AUTHORIZATION *[Signature]*

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.