



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: Thomas A 4-A
Lease Owner: ST Petroleum

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

Commenced Spudding:
6/13/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
0-40	Soil-Clay	40
18	Shale	58
4	Lime	62
4	Shale	66
17	Lime	83
10	Shale	93
9	Lime	102
8	Shale	110
19	Lime	129
17	Shale	146
20	Lime	166
7	Shale	173
55	Lime	228
20	Shale	248
8	Lime	256
20	Shale	276
6	Lime	282
6	Shale	288
8	Lime	296
34	Shale	330
1	Lime	331
10	Shale	341
25	Lime	366
8	Shale	374
24	Lime	398
4	Shale	402
4	Lime	406
5	Shale	411
6	Lime	417
33	Shale	450
18	Sand	468
69	Shale	537
7	Sand	544
48	Shale	592
5	Lime	597
12	Shale	609
6	Lime	615
16	Shale	631
3	Lime	634
6	Shale	640

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. 4-A

Farm Thomas A

KS Johnson
(State) (County)

29 14 22
(Section) (Township) (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
0-40	Soil-clay	40	
18	Shale	58	
4	Lime	62	
4	Shale	66	
17	Lime	83	
10	Shale	93	
9	Lime	102	
8	Shale	110	
19	Lime	129	
17	Shale	146	
20	Lime	166	
7	Shale	173	
55	Lime	228	
20	Shale	248	
8	Lime	256	
20	Shale	276	
6	Lime	282	
6	Shale	288	
8	Lime	296	
34	Shale	330	
1	Lime	331	
10	Shale	341	
25	Lime	366	
8	Shale	374	
24	Lime	398	
4	Shale	402	
4	Lime	406	

406

Thickness of Strata	Formation	Total Depth	Remarks
5	shale	411	
6	lime	417	
33	shale	450	Heather
18	sand	468	
69	shale	537	no Oil
7	sand	544	
48	shale	592	no Oil
5	lime	597	
12	shale	609	
6	lime	615	
16	shale	631	
3	lime	634	
6	shale	640	
4	lime	644	
63	shale	707	
12	sand	719	
39	shale	758	no Oil
10	sand	768	
12	sandy shale	780	some shale - no Oil
98	shale	878	
10	sand	888	
52	sandy shale	940	good odor - poor show TD



CONSOLIDATED
Oil Well Services, LLC

259691

TICKET NUMBER 41998

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

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
6/14/13	7532	Thomas A # 4-A	NE 29	14	22	JO

CUSTOMER
ST Petroleum Inc.

MAILING ADDRESS
18800 Sunflower Rd

CITY Edgerton STATE KS ZIP CODE 66021

TRUCK #	DRIVER	TRUCK #	DRIVER
481	CasKen		
466	Gar Moo		
558	Wil Mat		
675	Kei Det		

JOB TYPE long string HOLE SIZE 5 5/8" HOLE DEPTH 940' CASING SIZE & WEIGHT 2 7/8" EUE

CASING DEPTH 927' DRILL PIPE TUBING Baffle - 919' OTHER _____

SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____

DISPLACEMENT 5.32 bds DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.5 bpm

REMARKS: held safely, meeting, established circulation, mixed & pumped 200 # Premium Gel followed by 10 bbls fresh water, mixed & pumped 117 sts 50/50 Pozmix cement w/ 2 7/8" gel + 4 # Floceal per st, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 5.32 bds fresh water, pressured to 800 PSI, released pressure, shut in casing.

Well held pressure for 30 min MIT

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	30 mi	MILEAGE		126.00
5402	927'	casing footage		
5407	minimum	ten mileage		368.00
5502c	2 hrs	80 vac		180.00
1124	117 sts	50/50 Pozmix cement		1345.50
118B	397 #	Premium Gel		87.34
1107	29 #	Floceal		71.63
4402	1	2 1/2" rubber plug		29.50
			7.525%	SALES TAX
				ESTIMATED TOTAL
				115.43
				3408.40

Ravin 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 for