



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: _____



1151951

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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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 # 259828

Invoice Date: 06/24/2013 Terms: 0/0/30,n/30

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D & Z EXPLORATION
901 N. ELM ST.
P.O. BOX 159
ST. ELMO IL 62458
(618) 829-3274

EAST GORDON I-9
42048
27-14-22
06-20-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	110.00	11.5000	1265.00
1118B	PREMIUM GEL / BENTONITE	285.00	.2200	62.70
1111	SODIUM CHLORIDE (GRANULA	213.00	.3900	83.07
1110A	KOL SEAL (50# BAG)	550.00	.4600	253.00
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50
Description		Hours	Unit Price	Total
369	80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
495	CEMENT PUMP	1.00	1085.00	1085.00
495	EQUIPMENT MILEAGE (ONE WAY)	30.00	4.20	126.00
495	CASING FOOTAGE	919.00	.00	.00
510	MIN. BULK DELIVERY	1.00	368.00	368.00

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Parts: 1693.27 Freight: .00 Tax: 127.42 AR 3579.69
Labor: .00 Misc: .00 Total: 3579.69
Sublt: .00 Supplies: .00 Change: .00
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Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

259828

TICKET NUMBER 42048

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
6-20-13	3392	East Garden I-9	NW 27	14	22	JO
CUSTOMER D&Z Exploration			TRUCK #			
MAILING ADDRESS 901 N Elm St.			DRIVER			
CITY ST Elmo			TRUCK #			
STATE IL			DRIVER			
ZIP CODE 62458			TRUCK #			
			DRIVER			

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 940 CASING SIZE & WEIGHT 2 7/8 - EUE
 CASING DEPTH 919 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 5.34 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5B PM

REMARKS: Hold crew meeting. Establish pump rate Mix+ Pump 100* Gel Flush.
Mix+ Pump 110 SKS 50/50 Poz Mix Cement 20% Gel 5% Salt. 5#
5# Kal Seal/sk. Cement to surface. Flush pump & lines clean.
Displace 2 1/2" Rubber plug to casing TD. Pressure to 800* PSI.
Hold & Monitor pressure for 30 min MIT. Release pressure to
Set float valve. Shut in casing.

KCC Rep: Taylor Norman
TOS Drilling - Chad Weaver

Fred Mader

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	919	Casing footage		N/C
5407	Medium	Ten Miles		368 ⁰⁰
5502	2 hrs	80 BBL Vac Truck		180 ⁰⁰
1124	110 SKS	50/50 Poz Mix Cement		1265 ⁰⁰
118B	285 #	Premium Gel		62 ⁰⁷
111	213 #	Granulated Salt		83 ⁰⁷
1110A	550 #	Kal Seal		253 ⁰⁰
4402	1	2 1/2" Rubber Plug		29 ⁴⁰
			7.525%	SALES TAX
				127 ⁴²
				ESTIMATED TOTAL
				3579 ⁶⁹

completed

Revin 3737

AUTHORIZATION Deke Keldan

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.

Johnson County, KS
 Well: East Gordon I-9
 Lease Owner: D Z Exploration

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

Commenced Spudding:
 6/19/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
23	Soil-Clay	23
17	Shale	40
5	Lime	45
8	Shale	53
14	Lime	67
8	Shale	75
9	Lime	84
8	Sand and Sandy Shale	92
18	Lime	110
17	Shale	127
18	Lime	145
9	Shale	154
54	Lime	208
23	Shale	231
8	Lime	239
20	Shale	259
6	Lime	265
7	Shale	272
9	Lime	281
33	Shale	314
1	Lime	315
11	Shale	326
26	Lime	352
6	Shale	358
23	Lime	381
5	Shale	386
4	Lime	390
5	Shale	395
6	Lime	401
5	Shale	406
7	Sand	413
10	Sandy Shale	423
92	Shale	515
6	Sand	521
7	Sandy Shale	528
47	Shale	575
7	Lime	582
10	Shale	592

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 $SPM \times d$

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. 1-9

Farm East Gordon

KS Johnson
(State) (County)

27 14 22
(Section) (Township) (Range)

For D&Z Exploration
(Well Owner)

Town Oilfield Services, Inc.

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

Thickness of Strata	Formation	Total Depth	Remarks
23	soil/clay	23	
17	shale	40	
5	Lime	45	
8	shale	53	
14	Lime	67	
8	shale	75	
9	Lime	84	
8	crudy shale & sand	92	
18	Lime	110	
17	shale	127	
18	Lime	145	
9	shale	154	
54	Lime	208	
23	shale	231	
8	Lime	239	
20	shale	259	
6	Lime	265	
7	shale	272	
9	Lime	281	
33	shale	314	
1	Lime	315	
11	shale	326	
26	Lime	352	
6	shale	358	
23	Lime	381	
5	shale	386	
4	Lime	390	

390

Thickness of Strata	Formation	Total Depth	Remarks
5	shale	395	
6	lime	401	Heather
5	shale	406	
7	sand	413	grey, no oil
10	sandy shale	423	
92	shale	515	
6	sand	521	
7	sandy shale	528	
47	shale	575	
7	lime	582	
10	shale	592	
5	lime	597	
16	shale	613	
3	lime	616	
8	shale	624	
9	lime	633	
35	shale	668	red bed - 338'
15	sand	683	
12	sandy shale	695	
41	shale	736	
5	Broken sand	741	
10	sandy shale	751	
23	shale	774	
5	sand	779	
75	shale	854	
4	sandy lime	858	25% oil
2	sand	860	50% oil, ok bleeding

