



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: _____



1152778

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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Form	ACO1 - Well Completion
Operator	Jason Oil Company, LLC
Well Name	BECKER 2
Doc ID	1152778

Tops

Name	Top	Datum
ANHYDRITE	926	982
TOPEKA	2847	-939
HEEBNER SHALE	3077	-1169
TORONTO	3098	-1190
DOUGLAS SHALE	3112	-1204
LKC	3137	-1229
BKC	3370	-1462
ARBUCKLE	3390	-1482

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

785-483-2025
785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 6440

Date	2-19-13	Sec.	25	Twp.	15	Range	15	County	Russell	State	Ks	On Location		Finish	430 AM
Location													Bulter RD 5 to CL 1 1/2 N Winto		

Lease	Becker	Well No.	2	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Contractor	Royal 2				Charge To	Jason Oil
Type Job	Surface				Street	
Hole Size	12 1/4	T.D.	336	City		State
Csg.	52 1/2	Depth		The above was done to satisfaction and supervision of owner agent or contractor.		
Tbg. Size		Depth		Cement Amount Ordered		
Tool		Depth		1180 3900 2800		
Cement Left in Csg.	0.14	Shoe Joint	20 FT			
Meas Line		Displace	2.314			

EQUIPMENT

Pumptrk	5	No.	Cementer	Common	180
			Helper	Poz. Mix	
Bulktrk	4	No.	Driver	Gel.	3
			Driver	Calcium	7
Bulktrk	16	No.	Driver	Hulls	
			Driver	Salt	

JOB SERVICES & REMARKS

Remarks:	Becker 2	Flowseal	
Rat Hole		Kol-Seal	
Mouse Hole		Mud CLR 48	
Centralizers		CFL-117 or CD110 CAF 38	
Baskets		Sand	
D/V or Port Collar		Handling	190
		Mileage	

FLOAT EQUIPMENT

Cement did Circulate		Guide Shoe	
		Centralizer	
		Baskets	
		AFU Inserts	
		Float Shoe	
		Latch Down	

Pumptrk Charge	Surface	Tax	
Mileage	12	Discount	
		Total Charge	

of the Bl line



DRILL STEM TEST REPORT

Prepared For: **Jason Oil Company LLC**

3718 83rd Street
P.O. Box 701
Russell Kansas, 667665-0701

ATTN: Jeff Lawler

Becker #2

25-15s-15w-Russell

Start Date: 2013.02.24 @ 07:15:00

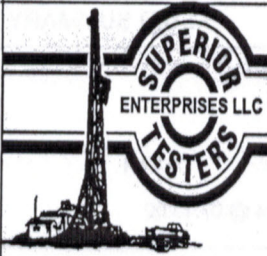
End Date: 2013.02.24 @ 12:40:00

Job Ticket #: 17555 DST #: 1

Superior Testers Enterprises LLC
PO Box 138 Great Bend KS 67530
1-800-792-6902

Printed: 2013.03.06 @ 01:06:10

Jason Oil Company LLC 25-15s-15w-Russell Becker #2 DST # 1 Arbuckle 2013.02.24



DRILL STEM TEST REPORT

TOOL DIAGRAM

Jason Oil Company LLC
 3718 83rd Street
 P.O. Box 701
 Russell Kansas, 667665-0701
 ATTN: Jeff Lawler

25-15s-15w-Russell
Becker #2
 Job Ticket: 17555 DST#: 1
 Test Start: 2013.02.24 @ 07:15:00

Tool Information

Drill Pipe:	Length: 3367.00 ft	Diameter: 3.80 inches	Volume: 47.23 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 20000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 54000.00 lb
			<u>Total Volume: 47.23 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	20.00 ft			String Weight: Initial 32000.00 lb
Depth to Top Packer:	3367.00 ft			Final 32000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	79.50 ft			
Tool Length:	99.50 ft			
Number of Packers:	3	Diameter: 6.75 inches		

Tool Comments:

Tool Description

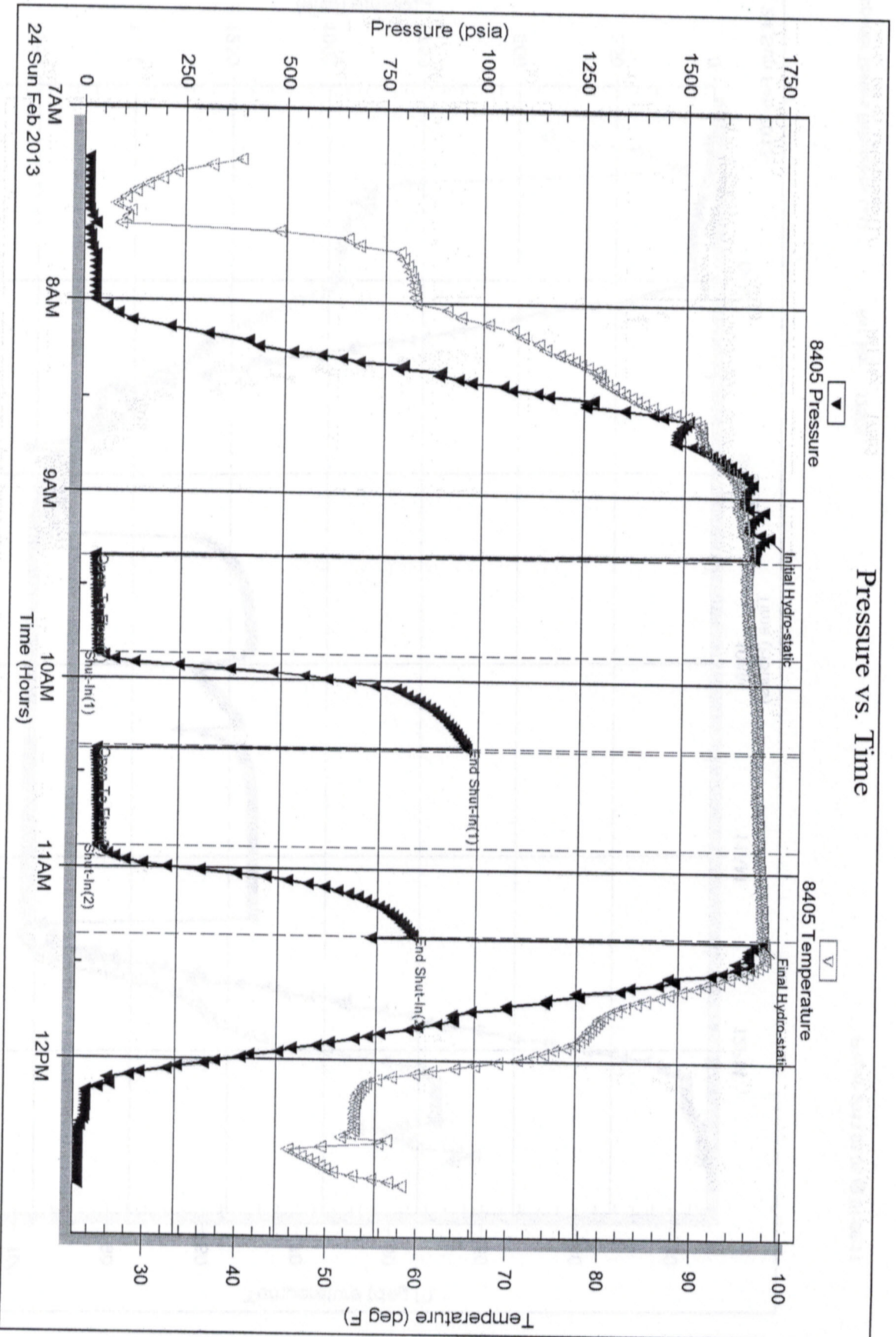
Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Shut-In Tool	5.00			3352.00	
Hydraulic Tool	5.00			3357.00	
Packer	5.00			3362.00	20.00 Bottom Of Top Packer
Packer	5.00			3367.00	
Anchor	24.00			3391.00	
Recorder	1.00			3392.00	
Recorder	1.00			3393.00	
Blank Off Sub	1.00			3394.00	79.50 Tool Interval
Packer	5.00			3399.00	
C.O. Sub	0.75		Inside	3399.75	
pipe	31.00		Outside	3430.75	
C.O. Sub	0.75			3431.50	
Anchor	11.00			3442.50	
Recorder	1.00			3443.50	
Bullnose	3.00			3446.50	1000098.50 Bottom Packers & Anchor
Total Tool Length:	99.50				

Serial #: 8405

Jason Oil Company LLC

Becker #2

DST Test Number: 1



Superior Testers Enterprises LLC

Ref. No: 17555

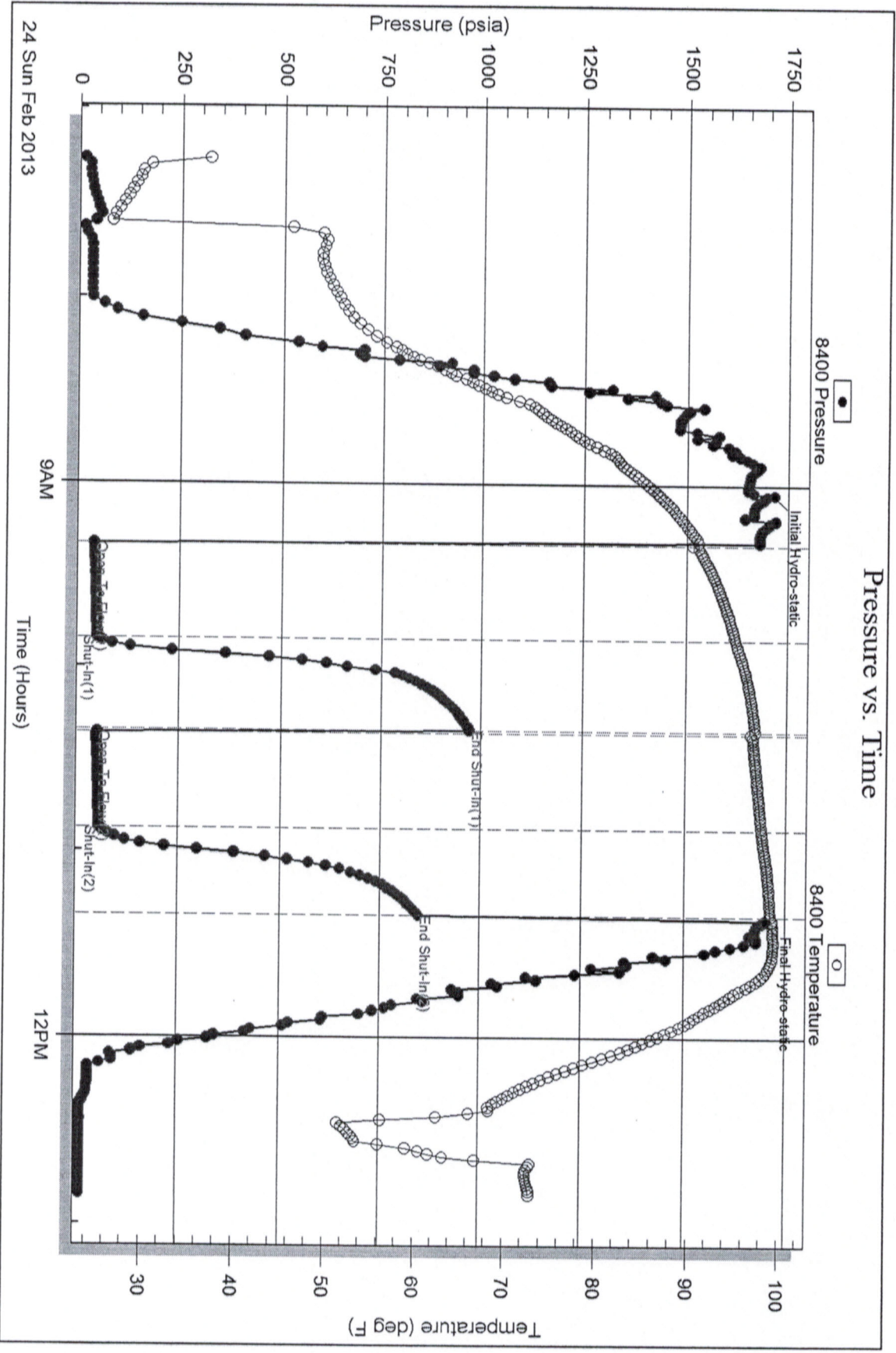
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Serial #: 8400

Jason Oil Company LLC

Becker #2

DST Test Number: 1



Superior Testers Enterprises LLC

Ref. No: 17555

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