



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: _____



1153527

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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ALLIED OIL & GAS SERVICES, LLC

060481

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
West Bend, Ka

DATE <u>8-13</u>	SEC <u>34</u>	TWP <u>11</u>	RANGE <u>15</u>	CALLED OUT <u>1:00 PM</u>	ON LOCATION <u>3:00 PM</u>	JOB START <u>3:30 PM</u>	JOB FINISH <u>7:00 PM</u>
LEASE <u>Eulart</u>	WELL # <u>?</u>	LOCATION <u>Northham Street, North Ka</u>			COUNTY <u>Russell</u>	STATE <u>Ka</u>	
OLD OR NEW (Circle one) <u>NEW</u>			Saline Lane, 1/2 E, North E, Fairview rd 1 1/2 E, South side				

CONTRACTOR Ducan 4
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 1/8 T.D. 3300
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 3240
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER Some
 CEMENT AMOUNT ORDERED 230 lbs 69/40 490 lbs
1/4" Flow/oh
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____

EQUIPMENT
 PUMP TRUCK CEMENTER Tom Dickson
 # 366 HELPER Charles Kingan
 BULK TRUCK
 # 410 DRIVER Kevin
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:
50 lbs at 3240'
85 lbs at 900'
100 lbs at 550'
16 lbs at 40'
30 lbs in Annhole
20 lbs in Mouthhole

CHARGE TO: ESP Development
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL _____
 SERVICE
 DEPTH OF JOB 3240'
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____
 PLUG & FLOAT EQUIPMENT
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

TOTAL _____
 SALES TAX (If Any) _____

ALLIE OIL & GAS SERVICES, LLC 059324

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Cir. 8 Road

DATE <u>6.4.13</u>	SEC. <u>34</u>	TWP. <u>11S</u>	RANGE <u>15W</u>	CALLED OUT <u>9 AM - 6/13</u>	ON LOCATION <u>11:45 AM</u>	JOB START <u>2:30 PM</u>	JOB FINISH <u></u>
LEASE <u>01 EHot</u>	WELL # <u>47</u>	LOCATION <u>Cushman 12N to Fairview Rd</u>		COUNTY <u>Russell</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)		E 2 1/4 S 2 mile					

CONTRACTOR Dixey Drilling

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 520

CASING SIZE 8 1/2 DEPTH 510.81

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 500 MINIMUM

MEAS. LINE SHOE JOINT 20

CEMENT LEFT IN CSG. 1272 bbls

PERFS.

DISPLACEMENT 31.85 bbls

OWNER ESP Development

CEMENT AMOUNT ORDERED 31.66 2 1/2 gal Class A

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

HANDLING @

MILEAGE @

EQUIPMENT

PUMP TRUCK CEMENTER Patrick Helgerson

597 HELPER Charles Kuyon / Ben Newell

BULK TRUCK

609 DRIVER Kevin Wieghaus

BULK TRUCK

DRIVER

REMARKS:

Pumped 5 bbl spacer-water.

Pumped 272 bbl cement @ 15.2 PPG.

Launched rubber plug. Pumped displacement 31.85 bbls - water, shut in.

Circulated 10 bbls cement to surface

CHARGE TO: ESP Development

STREET 17419 250th AVE

CITY Hays STATE KS ZIP 67601

To: Allied Oil & Gas Services, LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Mike [unclear]

SIGNATURE Mike [unclear]

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS



TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 53217

Well Name & No. O.C. Eulet #7 Test No. 1 Date 6-7-13
 Company ESP Development Elevation 1811 KB 1803 GI
 Address 1749 250 AVE Hays KS, 67601
 Co. Rep / Geo. Cliff Ottoway Rig Discovery Rig # 4
 Location: Sec. 34 Twp. 11 Rge. 15 Co. Russell State KS

Interval Tested 2980 - 3020 Zone Tested LHC C+D
 Anchor Length 40 Drill Pipe Run 2939 Mud Wt. 8.7
 Top Packer Depth 2976 Drill Collars Run 30 Vis 57
 Bottom Packer Depth 2980 Wt. Pipe Run 0 WL 7.6
 Total Depth 3020 Chlorides 2500 ppm System LCM 2 1/2 #

Blow Description B.O.B. In 9 mins, Weat surface blow back built to 1m
B.O.B. In 10 mins Weat surface blow

Rec	Feet of	%gas	%oil	%water	%ml
<u>62</u>	<u>Feet of MCW Oil spots on top</u>		<u>80</u>	<u>20</u>	<u>220</u>
<u>62</u>	<u>Feet of MCW</u>		<u>60</u>	<u>40</u>	<u>40</u>
<u>62</u>	<u>Feet of WCM</u>		<u>2</u>	<u>98</u>	<u>98</u>
<u>434</u>	<u>Feet of GTP</u>	<u>100</u>			
Rec	Feet of	%gas	%oil	%water	%ml

Rec Total 186 BHT 95 Gravity - API RW 250 @ 67 °F Chlorides 27000 pp

(A) Initial Hydrostatic 1453 Test 1150 T-On Location 2:50
 (B) First Initial Flow 14 Jars T-Started 4:02
 (C) First Final Flow 54 Safety Joint T-Open 5:40
 (D) Initial Shut-In 280 Circ Sub NK T-Pulled 8:25
 (E) Second Initial Flow 52 Hourly Standby T-Out 10:10
 (F) Second Final Flow 98 Mileage 80 R/T 124 Comments _____
 (G) Final Shut-In 273 Sampler _____
 (H) Final Hydrostatic 1396 Straddle _____

Shale Packer _____
 Extra Packer _____
 Extra Recorder _____
 Day Standby _____
 Accessibility _____
 Sub Total 1274

Ruined Shale Packer _____
 Ruined Packer _____
 Extra Copies _____
 Sub Total 0
 Total 1274
 MP/DST Disc't _____

Initial Open 30
 Initial Shut-In 45
 Final Flow 45
 Final Shut-In 45

Approved By [Signature] Our Representative [Signature]

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