



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: _____



1166765

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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EASE NAME LSPRATT OPERATOR Utah Oil START DATE: 8-28-13
 WELL # KO-17 LOCATION: API #
 SURFACE PIPE: Ft 20 Cement(#bags) 2
 PRODUCTION: PIPE: SIZE: 2 7/8 =FT 740

Thickness	Formation	Comment	Depth	Thickness	Formation	Comment	Depth
3	sol. clay		3	9	broken sand	oil	646
13	lime		16	5	grey sand		651
96	shale		112	5	shale		656
19	lime		131	4	grey sand		660
25	shale		156	22	shale		682
3	lime		159	3	lime		685
39	shale		198	13	shale		698
10	lime		208	5	brown sand	oil color	703
2	shale		210	46	shale		749
6	lime		216	6	brown sand		755
9	shale		225	5	shale	TD	760
13	lime		238				
2	shale		240				
9	lime		249				
9	shale		258				
21	lime		279				
6	shale		285				
14	lime		299				
137	shale		436				
20	grey sand		456				
7	lime		465				
48	shale		511				
5	lime		516				
12	shale		518				
5	lime		533			Kenny	
11	shale		544				
8	lime		552			1 core	
4	brown lime	oil	556				
3	lime		559				
2	shale		561				
2	oil sand	oil	563				
2	white sand		565				
10	shale		581				
21	grey sand		602				
35	shale		637				



DIY SUPPLY Ottawa #3505
 2204 S PRINCETON CIRCLE DR
 OTTAWA, KS 66067

CUSTOMER COPY

PHONE: (785) 242-8200

CUST NO: 79 JOB NO: 000 PURCHASE ORDER: DEAN UTAH OIL REFERENCE: 785-241-3923 TERMS: CASH/CHECK/BANKCARD CLERK: 9DDG DATE / TIME: 8/30/13 2:00

SOLD TO: CASH

SHIP TO:

TERMINAL: 903
 ORDER: 84425

DEL. DATE: 8/27/13

TAX: 090 OTTAWA SALES TAX

INVOICE: A85031

LINE	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/ PER	EXTENSION
1	525	525	EA	1290915	PORTLAND CEMENT 94LB MFG part# 1124-94	9.45	525	8.50 /EA	4,462.50
2	15	15	EA	5040001	PALLET QUIKRETE/PAVESTN MFG part# PALLET		15	15.00 /EA	225.00
<p><i>4 PLTS on 8-30-13 WGR</i> <i>1 PLT on 8-30-13 WGR</i> <i>1 on the 3rd of Sep</i> <i>13 PLTS back</i></p>									

PRIOR DEPOSIT 5097.66

TAXABLE 4687.50
 NON-TAXABLE 0.00
 SUBTOTAL 4687.50

TAX AMOUNT 410.16

TOTAL 5097.66



TOT WT: 49350.00

X _____
 Received By