



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
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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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 44712
LOCATION Ottawa
FOREMAN Alan Madala

PO Box 804, Okemah, KS 68720
820-451-8210 or 800-687-8270

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER'S I.D.#	WELL NAME & NUMBER	ACTION	TEAMSHIP	RANGE	COUNTY
10-10-13	7752	W.C.C. T9	SW 22	26	18	OL
CUSTOMER SC2 Resources MAILING ADDRESS 8614 Cedarspur Dr Houston TX 77055			TRUCK # DRIVER TRUCK # DRIVER 574 DuPont So. Katy, Mead 368 Art Mad 510 Sealy 365 Mackay			

JOB TYPE Logistics HOLE SIZE 6 7/8 HOLE DEPTH 880 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 885 DRILL PIPE TUBING OTHER
SLURRY WEIGHT & SLURRY VOL. WATER gauge CEMENT LEFT IN CASING 765
DISPLACEMENT 5 DISPLACEMENT PSI 800 MIX PSI 300 RATE 46pm

REMARKS: Held meeting. Established rate. Mixed & pumped 100 gal bilge oil by 1345K. 50/50 cement plus 2% gel. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve. Held pressure for 30 minute M.I.T. Used CDMS plug.

JTC Drilling

Alan Madala

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00
5406	6.5	MILEAGE	368	2392.80
5402	865	CASING FOOTAGE	368	316320.00
5407A	374.53	700 Miles		528,129.00
5502C	172	80 gal.		135.00
1124	1364	50/50 cement		1541.00
1181B	325	gal		76.50
4402	1	2 1/2 plug		27.00
SALES TAX				121.50
ESTIMATED TOTAL				378,659

AUTHORIZATION  TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or on 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.

Operator License # 34897
 Operator SCZ Resources
 Address 8614 Cedarspur Drive
 City Houston, TX 77055
 Contractor JTC Oil, Inc.
 Contractor License # 32834
 T.D. 880
 T.D. of pipe 863
 Surface pipe size 7"
 Surface pipe depth 20'
 Well Type Injection

API # 15-001-30791-00-00
 Lease Name Kendall Dice
 Well # I-9
 Spud Date 10/3/13
 Cement Date
 Location Sec 22 T 26 R 18
 660 feet from S line
 1980 feet from W line
 County Allen

Driller's Log

Thickness	Strata	From	To
7	Dirt	0	7
13	Stone Mix	7	20
15	Lime	20	35
22	Shale	35	57
11	Lime	57	68
57	Shale	68	125
66	Lime	125	191
7	Black Shale	191	198
23	Lime	198	221
5	Shale	221	226
26	Lime	226	252
3	Shale	252	255
25	Lime	255	280
132	Shale	280	412
35	Lime	412	447
5	Shale	447	452
1	Top Sand	452	453
2	OK	453	455
2	Good	455	457
1	End Sand	457	458
10	Sandy Shale	458	468
78	Shale	468	546
21	Lime	546	567
41	Shale	567	608
7	Lime	608	615
3	Lime Oil	615	618
4	Lime	618	622
23	Shale Mix	622	645
144	Shale	645	789
3	Top Sand	789	792
2	Sand	792	794
2	OK	794	796
2	OK	796	798
2	OK	798	800
2	End Sand	800	802
20	Sandy Shale	802	822
2	Top Sand	822	824
2	OK	824	826
2	End Sand	826	828

OK

OK

28	Sandy Mix	828	856	
2	Sand	856	858	OK
2	End Sand	858	860	
20	Sandy Mix	860	880	