



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: _____

1167401



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 <table style="width:100%; border: none;"> <tr> <td style="width:70%; border: none;">Name</td> <td style="width:15%; border: none;">Top</td> <td style="width:15%; border: none;">Datum</td> </tr> </table>	Name	Top	Datum
Name	Top	Datum		

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Pioneer Natural Resources USA, Inc.
Well Name	GANO et al ATU 1
Doc ID	1167401

Tops

Name	Top	Datum
KRIDER	2426	
ODELL	2459	
WINFIELD	2489	
GAGE	2523	
TOWANDA	2555	
FT_RILEY	2611	
WREFORD	2691	
A1_LIME	2730	
B1_LIME	2791	
B2_LIME	2819	
B3_LIME	2839	
B4_LIME	2855	
B5_LIME	2867	

CEMENTING TREATMENT REPORT



TREATMENT NUMBER GH2013008	DATE 7/16/2013
STAGE	JOB TYPE surface
	surface

WELL NAME AND NO. Gano ATU1	LOCATION (LEGAL) 207°FN&228°FEL,sec 30,T29S,R37W	RIG NAME: Trinidad Drilling Rig #216	CEMENT PUMPER: 23004
FIELD	FORMATION	WELL DATA	FT TOP FT
COUNTY Grant Co	STATE KS	API NO.	
RIG FORMAN Kevin Swafford		BIT SIZE	CSG/Liner Size 8 5/8
CEMENT SUPER Gary Hessling		TOTAL DEPTH 700	WEIGHT 24
		MUD TYPE	FOOTAGE 676
		<input type="checkbox"/> BHST	GRADE
		<input type="checkbox"/> BHCT	THREAD
		MUD DENSITY	LESS FOOTAGE (SEE POINTS) 42.2
		MUD VISC	Disp. Capacity 40.3
		TOTAL: 40.3	

Include Footage From Ground Level To Head In Disp. Capacity			
TYPE	DEPTH	TYPE	DEPTH
TYPE	DEPTH	TYPE	DEPTH
TYPE	DEPTH	TYPE	DEPTH

SPECIAL INSTRUCTIONS

Head & Plugs	<input type="checkbox"/> FBG	<input type="checkbox"/> D.P.	SQUEEZE JOB	
<input type="checkbox"/> Double Box 6	WEIGHT	TOOL	TYPE	DEPTH
<input type="checkbox"/> Single	GRADE	TAIL PIPE: SIZE DEPTH		
<input type="checkbox"/> Swage	THREADS	TUBING VOLUME BBLs		
<input type="checkbox"/> Knockout	<input type="checkbox"/> New <input type="checkbox"/> Used	CSG VOL BELOW TOOL BBLs		
	DEPTH	TOTAL BBLs		
		ANNULAR VOLUME BBLs		

LIFT PRESSURE 234 psi	BUMP PLUG TO 500 over lift	CEMENT TEMPERATURE:	WATER QUALITY:	pH	SG	TEMP
PRESSURE LIMIT 1000 psi	NO. of Centralizers 5	ARRIVE ON LOCATION TIME: 0:00 DATE: 7/16/2013	RIG UP TIME: 0:30 DATE: 7/16/2013			LEFT LOCATION TIME: 5:30 DATE: 7/16/2013

TIME 0001 to 2400	PRESSURE		VOLUME PUMPED		JOB SCHEDULED FOR			ARRIVE ON LOCATION		RIG UP		LEFT LOCATION	
	TBG	CSG	INCR	CUM	TIME:	DATE:	DENSITY	TIME:	DATE:	TIME:	DATE:	TIME:	DATE:
0:00													
0:30													
1:30													
3:37		1000	2										
3:30		120	40		4	H2o	8.34						
3:38		80	114	154	4	Cmt	15						
4:12		40.3	40.3	194.3	4	H2o	8.34						
4:16													
4:19													
4:22													
4:26													
5:30													

System Used	No. of Sacks	Yield ft ³ /sk	COMPOSITION OF SYSTEM					SLURRY MIXED	
								BBLs	DENSITY
Surface Set	528	1.21	Surface set 25:75 (p/G) + 3% S1, 0.25 lb / sx p 29, 0.25 lb / sx p 46 @ 15 # gal					114	15

CIRCULATION <input type="checkbox"/> Yes <input type="checkbox"/> No	WASHED CASING DOWN <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	BREAKDOWN	PSI	FINAL	1000	PSI
DISPLACEMENT VOL. 40.3 BBLs	RETURNED TO SURFACE 25	BEFORE PLUG BUMP	300	RATE	2	BPM



TREATMENT NUMBER GH2013008	DATE 2/12/2013
STAGE	JOB TYPE surface

WELL NAME AND NO. Gano ATU1	LOCATION (LEGAL) 207FNL&228' FEL_sec 30,T29S,R37W	RIG NAME: Trinidad Drilling Rig #216	CEMENT PUMP: 23004
FIELD	FORMATION	RIG FOREMAN: Kevin Swafford	CEMENT SUPERVISOR: Gary Hessling
COUNTY Grant Co	STATE KS	API NO.	ARRIVE ON LOCATION TIME: 0:00 DATE: 7/16/2013
			RIG UP TIME: 0:30 DATE: 7/16/2013
			LEFT LOCATION TIME: 5:30 DATE: 7/16/2013

TIME 0001 to 2400	PRESSURE		VOLUME PUMPED		JOB SCHEDULED FOR			COMMENT
	TBG	CSG	INC	CUM	TIME: 0:30	DATE: 7/16/2013		
					RATE	FLUID TYPE	DENSITY	

JOB SUMMARY:

ADDITIONAL NOTES:

CEMENTING TREATMENT REPORT



TREATMENT NUMBER GH2013003	DATE 7/18/2013
STAGE 1	JOB TYPE longstring longstring

WELL NAME AND NO. Weirich 32-33	LOCATION (LEGAL) 207 FNL & 228' FEL., Sec 30, T29S R37W	RIG NAME: Patterson UTI 190	CEMENT PUMPER: 23004
FIELD	FORMATION	WELL DATA	
COUNTY Grant Co	STATE KS	API NO.	
RIG FORMAN Dave Martinez	CEMENT SUPER Gary Hessling	WELL DATA	
		BIT SIZE	CSG/Liner Size 5 1/2
		TOTAL DEPTH 3002	WEIGHT 15.5
		MUD TYPE	FOOTAGE 2980.92
		<input type="checkbox"/> BHST	GRADE
		<input type="checkbox"/> BHCT	THREAD
		MUD DENSITY	LESS FOOTAGE (SEE FOOTAGE)
		MUD VISC	Disp. Capacity 68
		TOTAL: 68	
		Include Footage From Ground Level To Head In Disp. Capacity	
		TYPE DEPTH	TYPE DEPTH
		TYPE DEPTH	TYPE DEPTH

SPECIAL INSTRUCTIONS Cment production casing	Head & Plugs	<input type="checkbox"/> FBG	<input checked="" type="checkbox"/> D.P.	SQUEEZE JOB
	<input type="checkbox"/> Double Box 6	WEIGHT	TOOL	TYPE DEPTH
	<input type="checkbox"/> Single	GRADE	TAIL PIPE:	SIZE DEPTH
	<input type="checkbox"/> Swage	THREADS	TUBING VOLUME	BBLs
	<input type="checkbox"/> Knockout	<input type="checkbox"/> New <input type="checkbox"/> Used	CSG VOL BELOW TOOL	BBLs
LIFT PRESSURE 722 psi	BUMP PLUG TO 1722	CEMENT TEMPERATURE:	ANNULAR VOLUME	BBLs
NO. of Centralizers 18	WATER QUALITY:	pH	SG	TEMP

TIME 0001 to 2400	PRESSURE TBG CSG	VOLUME PUMPED INCR CUM	JOB SCHEDULED FOR TIME: 22:00 DATE: 7/17/2013	ARRIVE ON LOCATION TIME: 21:30 DATE: 7/17/2013	RIG UP TIME: 22:00 DATE: 7/17/2013	LEFT LOCATION 13 11:30 DATE: 7/18/2013
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TIME	TBG	CSG	INCR	CUM	RATE	FLUID TYPE	DENSITY	
21:30								Arrive on location
22:00								Rig up pumps and bulk equipment (7-17-13)
23:45								Rig unable to break circulation, need to perforate casing above float collar. Return 8:00 7-18-13
8:54	2000		2			H2o	8.34	Test pumps and lines to 2000 psi. Test good.
8:56		250	73		4	H2o	8.34	pumped 75 bbls H2o ahead.
9:17		375	129	204	4	Cmt		Mix and pump 129 bbls (302 sks) 12.5 # lead cement
9:52		80	40	244	4	Cmt	13.5	Mix and pump 40 bbls (140 sks) 13.5 tail cement
10:05		100	67	311	4	H2o	8.34	Drop plug and start displacement 67 bbls. No float. Cut displacement from 68 (CV with float) to 67
10:05		100						Pump 5 bbls fresh water displacement/ then pump 62bbls KCL displacement for total of 67 bbls
								Call outs 21 bbls away 4 bpm 200 psi. 42 away 4 bpm 575 psi 64 bbls away 4 bpm 990
								finale lift 990 sent 30 bbls good cement to pit
11:30								rigged down and left location

System Used	No. of Sacks	Yield ft ³ /sk	COMPOSITION OF SYSTEM				SLURRY MIXED	
			BBLs	DENSITY	BBLs	DENSITY		
Lead	302	2.4	25/75 SDC blend 3% P20, 2% S1, 0.25#/sx P29, 0.25#/sx P46 @ 12.5 #/gal				129	12.5
Surface Set	140	1.61	Surface set 25:75 (p/G) + 2% P20, 5 lb/sx p42, 2% S1, 0.25 #/sx P46, 15% p167, 2% p20 @ 13.5 # gal				40	13.5

CIRCULATION <input type="checkbox"/> yes <input type="checkbox"/> no	WASHED CASING DOWN <input type="checkbox"/> yes <input type="checkbox"/> no	BREAKDOWN	PSI	FINAL	990	PSI
DISPLACEMENT VOL. 67 BBLs	RETURNED TO SURFACE 30	BEFORE PLUG BUMP PRESSURE	990	RATE	44	BPM



TREATMENT NUMBER	DATE
GH2013003	
STAGE	JOB TYPE
	longstring

WELL NAME AND NO.	LOCATION (LEGAL)	RIG NAME:	CEMENT PUMP:
Weirich 32-33	207FNL & 228' FEL , Sec 30 , T29S R37W	Patterson UTI 190	23004

FIELD	FORMATION	RIG FOREMAN:	CEMENT SUPERVISOR:
		Dave Martinez	Gary Hessling

COUNTY	STATE	API NO.	ARRIVE ON LOCATION TIME:	DATE:	RIG UP TIME:	DATE:	LEFT LOCATION TIME:	DATE:
Grant Co	KS		21:30	7/17/2013	22:00	7/17/2013	11:30	7/18/2013

TIME	PRESSURE		VOLUME PUMPED		JOB SCHEDULED FOR			COMMENT
	TBG	CSG	INC	CUM	TIME:	DATE:		
0001 to 2400					RATE	FLUID TYPE	DENSITY	

JOB SUMMARY:

ADDITIONAL NOTES: