



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: _____



1170579

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				

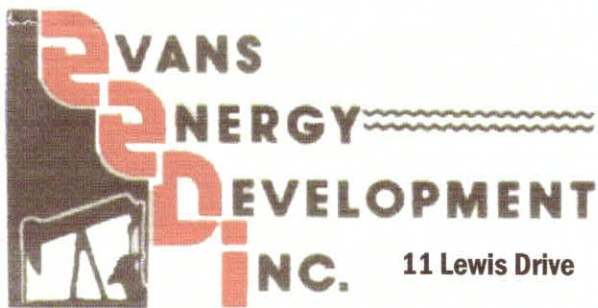
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**EVANS
ENERGY
DEVELOPMENT
INC.**

11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Verde Oil Company
Campbell #I-85-135
API #15-001-30,743
July 10-July 11, 2013

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
7	soil & clay	7
34	lime	41
2	shale	43
18	lime	61
5	shale	66
3	lime	69
20	shale	89
28	lime	117
1	shale	118
44	lime	162 base of the Kansas City
97	shale	259
4	lime	263
35	shale	298
6	lime	304
15	shale	319
4	lime	323
8	shale	331
6	lime	337
4	shale	341
19	lime	360
65	shale	425
4	lime	429
4	shale	433
13	lime	446
4	shale	450
4	lime	454
44	shale	498
13	lime	511 light oil show
12	shale	523
5	lime	528
87	shale	615
2	lime	617
113	shale	730
4	silty shale	734
3	broken sand	737 black & grey, no show
9	silty shale	746
1	coal	747
31	shale	778
2	broken sand	780 limey sand & brown sand, ok bleeding

5	silty shale	785
1	broken sand	786 50% brown sand 50% silty shale, ok bleeding
2	silty shale	788
13	shale	801
5	broken sand	806 light brown & shale, light odor
13	silty shale	819
3	broken sand	822 80% brown sand 20% shale, good bleeding
19	oil sand	841 brown sand, good bleeding
8	oil sand	849 brown & black, good bleeding
12	oil sand	861 black & grey, good bleeding
41	silty shale	902
1	coal	903
2	shale	905 Mississippi TD

Drilled a 9 7/8" hole to 22.4'

Drilled a 5 5/8" hole to 905'

Set 22.4' of 7" threaded and coupled surface casing, cemented with 6 sacks cement.

Set 889.85' of use 2 7/8" 8 round upset tubing including 4 centralizers, 1 float shoe, 1 baffle, 1 clamp.



CONSOLIDATED
Oil Well Services, LLC

260535

TICKET NUMBER 42162

LOCATION Ottawa KS

FOREMAN Fred Mad

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-11-13	8520	Campbell #185-135	SE 29	26	20	AL

CUSTOMER
Verde Oil Co.

MAILING ADDRESS
3345 Arizona Rd

CITY Savonburg STATE KS ZIP CODE 66772

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fred Mad		
495	Har Bee		
369	Der Mas		
510	Fed Tuc		

JOB TYPE Long String HOLE SIZE _____ HOLE DEPTH 905 CASING SIZE & WEIGHT 2 7/8 EUE

CASING DEPTH 890 DRILL PIPE Baffle in TUBING 878 OTHER _____

SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 12' + Plug

DISPLACEMENT 5.1 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Hold crew meeting. Establish Pump rate. Mix + Pump 100# Gel Flush
Mix + Pump 109 sks 50/50 Perm Mix Cement 2% Gel 5% Salt 5# Kol
Seal/Sk. Cement to surface. Flush pump + lines clean. Displace
Customer Supplied 2 1/2" Hatch down plug to Baffle in casing.
Pressure to 800# PSI. Release Pressure to set float Valve.
Shut in casing.

Evans Energy Dev. Inc. Mitchell.

Fred Mad

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 ⁰⁰
5406	—	MILEAGE		N/C
5402	890	Casing footage		N/C
5407A	354.795	Ton Miles	510	500.26
5502C	2 1/2 hrs	80 BBL Vac Truck	369	225 ⁰⁰
1124	109 sks	50/50 Perm Mix Cement		1253 ⁵⁰
1118B	283#	Premium Gel		62 ²⁶
1111	211#	Granulated Salt		82 ²⁹
1110A	545#	Kol Seal		250 ²⁰
			7.4%	SALES TAX
				ESTIMATED TOTAL
				122 ⁰¹
				3581 ⁰²

completed

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____

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