

1225171

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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 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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

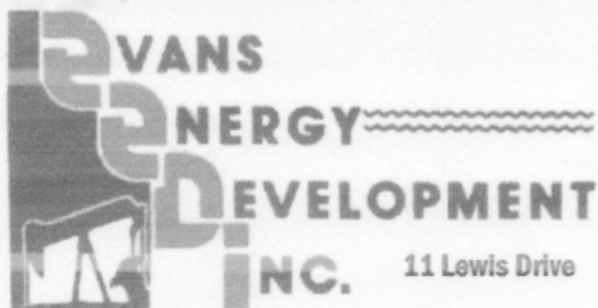
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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

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> _____	PRODUCTION INTERVAL: _____ _____
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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

Tailwater, Inc.

North Kempnich #57-T

API #15-003-26,269

August 13 - August 14, 2014

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
4	soil & clay	4
4	clay & gravel	8
82	shale	90
27	lime	117
12	shale	129
6	lime	135
48	shale	183
10	lime	193
5	shale	198
35	lime	233
6	shale	239
20	lime	259
4	shale	263
22	lime	285 base of the Kansas City
48	shale	333
27	sand	360 grey, no oil
98	shale	458
3	lime	461
6	shale	467
7	lime	474 oil show
13	shale	487
13	oil sand	500 green light bleeding
1	coal	501
7	shale	508
10	oil sand	518 green, good bleeding
6	shale	524
1	coal	525
3	shale	528
8	lime	536
5	shale	541
2	lime	543
30	shale	573
10	lime	583
50	shale	633
4	broken sand	637 oil odor, brown & green
31	shale	668
1	lime & shells	669
1	limey sand	670 brown & white, light oil odor

3	oil sand	673 brown ok bleeding
2	broken sand	675 brown & grey ok bleeding
4	broken sand	679 brown & grey light bleeding
33	shale	712 TD

Drilled a 9 7/8" hole to 21.6'

Drilled a 5 5/8" hole to 712'

Set 21.6' of 7" surface casing threaded and coupled cemented with 5 sacks of cement.

Set 702' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.

Hurricane Services, Inc.
 104 Prairie Plaza Parkway
 Garnett, KS 66032
 Office # 785-448-3100
 Toll Free # 855-718-8027



Ticket _____
 Location _____
 Foreman Joe Blanchard

Nº 50371

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
8-14-14		N. Kempnich 57-T	22 20 20	Anderson
Customer		Mailing Address	City	State Zip
Martin oil Properties				

Job Type:

			Truck #	Driver
Longstring	Casing TD 702		26	Joe
Hole Size: 5 5/8	Casing Size: 2 7/8	Displacement: 3.6	231	Tom
Hole Depth: 712	Casing Weight:	Displacement PSI: 425	108	Jeff. G
Bridge Plug:	Tubing:	Cement Left in Casing: 0	110	Scott
Packer:	PBTD:		242	Amos

Quantity Or Units	Description of Services or Product	Pump charge	
0 mi	Mileage Pump truck #231	\$3.25/Mile	NC
0 mi	Pick up #26	1.00	NC
103 SK	50/50 Poz Mix	11.20	1163.90
206 LB	Prem Gel 2%	.30	61.80
200 LB	Prem Gel Sursweep	.30	60.00
26 LB	Flo Seal	2.15	55.20
3400 gal	Garnett water	1.34	44.20
1 hr	80 vac #108	84.00	84.00
1 hr	80 vac #110	84.00	84.00
4.3 Tons	Bulk Truck Minimum Charge #242	\$1.15/Mile	150.00
1	Plugs 2 7/8 Top Plug	25.00	25.00
		Subtotal	2403.80
		Sales Tax	
		Estimated Total	

Remarks: Hook into well achieved Circulation. Pumped 10 bbl Gel Sursweep followed by 17 bbl water + 103 SKs of 50/50 poz mix cement. Flush Pump. Pumped Top Plug to bottom of set float shoe. Good Cement to Surface.

well was deeper than previous wells that's why more cement was used