





1239555

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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)*

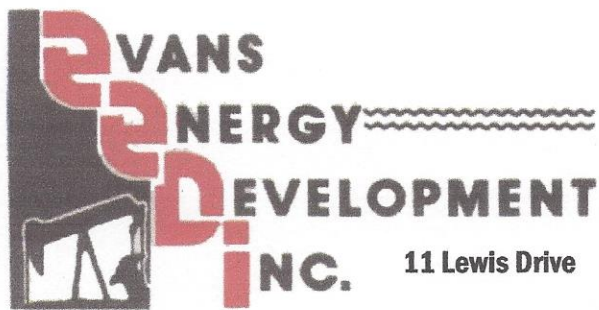
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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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**

SCZ Resources, LLC

Baker #SCZ-36

API #15-121-30,511

August 4 - August 5, 2014

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
3	soil/clay	3
17	lime	20
26	shale	46
5	lime	51
46	shale	97
10	lime	107
9	shale	116
33	lime	149
5	shale	154
23	lime	177
3	shale	180
5	lime	185
2	shale	187
6	lime	193 base of the Kansas City
106	shale	299
2	silty shale	301
6	broken sand	307 70% brown sand 30% shale ok bleeding
1	silty shale	308
22	shale	330
3	oil sand	333 soft light brown sand light bleeding
2	broken sand	335 20% light brown sand 80% shale light bleeding
4	oil sand	339 very soft brown sand, good bleeding
1	limey sand	340 white
9	oil sand	349 soft brown sand, good bleeding
1	broken sand	350 20% sand 80% shale light bleeding
4	oil sand	354 brown, very good bleeding
1	broken sand	355 20% sand 80% shale ok bleeding
1	oil sand	356 brown, good bleeding
1	lime	357
1	shale	358
16	lime	374
36	shale	410 TD

Drilled a 9 7/8" hole to 20.8'

Drilled a 5 5/8" hole to 410'

Set 20.8' of 7" threaded and coupled surface casing, cemented with 5 sacks cement.

Set 398' of 2 7/8" 8 round upset tubing with 2 centralizers, 1 float shoe, and 1 clamp.



**CONSOLIDATED**  
Oil Well Services, LLC

270484

TICKET NUMBER 48022

LOCATION Ottawa KS

FOREMAN Fred Mader

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
8-8-14	7752	Baker # SCZ-36	NW 26	18	22	MI

CUSTOMER <u>SCZ Resources LLC</u>		
MAILING ADDRESS <u>6614 Cedarspur Dr</u>		
CITY <u>Houston</u>	STATE <u>TX</u>	ZIP CODE <u>77055</u>

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fred Mad		
495	Har Boc		
369	Mikhaa		
558	Bru Bir		

JOB TYPE <u>Logging</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>410</u>	CASING SIZE & WEIGHT <u>2 7/8 EUE</u>
CASING DEPTH <u>393</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>2 1/2" Plug</u>
DISPLACEMENT <u>2.2 FBB</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>43 RPM</u>

REMARKS: Hold crew safety meeting. Establish pump rate. Mix + Pump 100# Gel Flush. Mix + Pump 43 SKS OWC Cement @ 5# Kol Seal / SK. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to 800# PSI. Release pressure to set float valve.

Evans Energy Dev. Inc. - Mitchell Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 <sup>00</sup>
5406	-	MILEAGE		N/C
5402	393	Casing footage		N/C
5407	69.66	Ton Miles	559	9823
55020	1 Hr	80 BBL Vac Truck	369	100 <sup>00</sup>
1126	43 SKS	OWC Cement	849.25	✓
1118B	100#	Premium Gel	22 <sup>00</sup>	✓
1110A	215#	Kol Seal	98 <sup>00</sup>	✓
		Material	970 <sup>13</sup>	
		Less 30%	-291 <sup>09</sup>	✓
		Total		679 <sup>11</sup>
4402	1	2 1/2" Rubber Plug		29 <sup>50</sup>
			2359.34	
			7.65%	
			SALES TAX	54 <sup>22</sup>
			ESTIMATED TOTAL	2046 <sup>05</sup>

Form 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