

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32606
Name: Devon Energy Production Co., LP
Address: 20 N. Broadway, Suite 1500
City/State/Zip: Oklahoma City, OK 73102
Purchaser: ONEOK
Operator Contact Person: Cathy S. Roark
Phone: (405) 552-4527
Contractor: Name: Key Energy
License: _____
Wellsite Geologist: NA

Designate Type of Completion:

____ New Well ____ Re-Entry ____ ☒ Workover
____ Oil ____ SWD ____ SIOW ____ Temp. Abd
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: Same

Well Name: _____

Original Comp. Date: 9/2/83 Original Total Depth: 4400

____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled ____ Docket No. ____
____ Dual Completion ____ Docket No. ____
____ Other (SWD or Enhr.?) ____ Docket No. ____

2/8/022/14/02

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15 - 055-20528
County: Finney
____ SW ____ SW ____ SE Sec. 17 Twp. 22 S. R. 34 ☐ East ☒ West
____ 330 feet from (S) N (circle one) Line of Section
____ 2310 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SWLease Name: Tyrell Well #: 1-17Field Name: Amazon DitchProducing Formation: Ft. Scott/Marmaton

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: 4400 Plug Back Total Depth: 4220

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 No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Cathy S RoarkTitle: Engineering Tech Date: 3/1/02Subscribed and sworn to before me this 1 day of March,Notary Public: Loiza RautelomaDate Commission Expires: 2-3-06

KCC Office Use ONLY

____ Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

____ Wireline Log Received

____ Geologist Report Received

____ UIC Distribution

Operator Name: Devon Energy Production Co., LP Lease Name: Tyrell Well #: 1-17
 Sec. 17 Twp. 22 S. R. 34 ☐ East ☒ West County: Finney

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☐ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum
 Ft. Scott 4375-382

CASING RECORD ☐ New ☐ 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
Surface	12 1/2	8 5/8	32	599	C1 H	260	2% CC, 10% gel
Production	7 7/8	5 1/2	14	4393	C1 H	275	4% gel

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 (Amount and Kind of Material Used)	Depth
6	4375-382	1000 gal 15% acid	

TUBING RECORD	Size 2 7/8	Set At 4883	Packer At 4333	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 2/14/02	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
 (If vented, Submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled

☐ Other (Specify)