



Operator Name: C&E Oil Lease Name: Jacot Well #: #9  
 Sec. 11 Twp. 32 S. R. 10  East  West County: CQ

**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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: <b>Geo log</b>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Pawnee</td> <td>1604</td> <td>524</td> </tr> <tr> <td>Ft Scott</td> <td>1656</td> <td>576</td> </tr> <tr> <td>Cherokee</td> <td>1696</td> <td>616</td> </tr> <tr> <td>Mississippi LM</td> <td>1996</td> <td>3916</td> </tr> </table>	Name	Top	Datum	Pawnee	1604	524	Ft Scott	1656	576	Cherokee	1696	616	Mississippi LM	1996	3916
Name	Top	Datum														
Pawnee	1604	524														
Ft Scott	1656	576														
Cherokee	1696	616														
Mississippi LM	1996	3916														

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
surface	10 3/4	8 5/8	23#	40 ft	Class A	40 sk	Focale 1/4# Cacz 3%

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
NA	Plugged Well		

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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 (Explain) _____
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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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**SOLIDATED**  
Well Services, LLC

**ENTERED**

TICKET NUMBER 28998

LOCATION Eureka

FOREMAN Troy Strickler

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

**FIELD TICKET & TREATMENT REPORT  
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-6-10	2092	Jacot #9				CO
CUSTOMER C+E Oil			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 422 Elm			445	John		
CITY Moline			515	Alan B		
STATE KS		ZIP CODE 67353				

JOB TYPE S/P 0 HOLE SIZE 12 1/4" HOLE DEPTH 42' CASING SIZE & WEIGHT 8 5/8"  
 CASING DEPTH 40' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 15 # SLURRY VOL 8.581 WATER gal/sk 5.2 CEMENT LEFT in CASING 10'  
 DISPLACEMENT 281 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 8 5/8" casing. Break circulation w/ 5 Bbl Fresh Water. Mixed 40skt Class A Cement w/ 2% Cacl<sub>2</sub>. Displace w/ 281 Fresh Water. Shut casing in. Good cement to surface.

Job Complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE		
5406	40	MILEAGE	725.00	725.00
			3.65	146.00
11045	40skt	Class A Cement	13.50	540.00
1102	75*		.75	56.25
5407	1.887m	Ton mileage	m/c	315.00
				<b>RECEIVED</b>
				<b>AUG 23 2010</b>
				<b>KCC WICHITA</b>
				<u>Thank You</u>
			Sub Mt	1782.25
			SALES TAX	49.49
			ESTIMATED TOTAL	1831.74

Ravin 3737

235161

AUTHORIZATION Called by Cotton

TITLE C+G Oily

DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing...

