OIL & GAS CONSERVATION DIVISION

ORIGINAL Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5953	API No. 15 - 125-31974-00-00
Name: A.R.&R. Ltd.	Spot Description:
Address 1: 6213 Sawgrass Pl	Se ne ne Sec. 30 Twp 34 S. R. 14 East West
Address 2:	Feet from North / South Line of Section
City: Bartlesville State: OK Zip: 7400	660 Feet from Fast / West Line of Section
Contact Person: Andy Park	Footages Calculated from Nearest Outside Section Corner:
Phone: (620) 252-5009	DNE DNW VSE DSW
CONTRACTOR: License #	County: montgomery
Name: Kurtis Energy	Lease Name: Kincaid Well #: 2 Weiser
Andy Park	havana/wayside
D	
Purchaser: Pacer	
Designate Type of Completion:	Elevation: Ground: 830 Kelly Bushing:
✓ New Well	
Ø oil ☐ wsw ☐ swd ☐	SIOW Amount of Surface Pipe Set and Cemented at: 24 Feet
Gas D&A ENHR	SIGW Multiple Stage Cementing Collar Used? Yes No
·□ og □ gsw □	Temp. Abd. If yes, show depth set:Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from: 1609
Cathodic Other (Core, Expl., etc.):	if Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Into as follows:	feet depth to: w/sx cmt.
Operator:	
	Ortiling Fluid Management Plan
Well Name:	(Sala mad so conclude non-sic readore) by
Original Comp. Date: Original Total Depth:	Chloride content:ppm Fluid volume:bbis
Deepening Re-perf. Conv. to ENHR	Conv. to SWD Dewatering method used: let dry and fill
Conv. to GSW	
Plug Back: Plug Back Tot	at Depth Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	
ENHR Permit #:	
GSW Permit #:	County: Permit #:
<u>9-22-10</u> <u>10-5-10</u> <u>10-8-</u>	
	on Date or etion Date
Kansas 67202, within 120 days of the spud date, recomple of side two of this form will be held confidential for a period tiality in excess of 12 months). One copy of all wireline log	n shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, stion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidengs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST Submit CP-111 form with all temporarily abandoned wells.
AFFIDAVIT I am the affiant and I hereby certify that all requirements of the	statutes, rules and regu-
lations promulgated to regulate the oil and gas industry have	been fully complied with Li cetter or confidentiality received
and the statements herein are complete and correct to the b	
11/1	Confidential Release Date:
Signature Indiana	Geologist Report Received
Signature Indyan 5	=17-11 UIC Distribution AHZ-DIQ -5/27(1)

Operator Name: A.R.&R. Ltd.				Lease	Lease Name: Kincaid			well #: 2 Weiser		
Sec. 30 Twp34 S. R. 14 East West					r: mon	tgomery	······································	· · ·		···
INSTRUCTIONS: Sh time tool open and clo recovery, and flow rat- line Logs surveyed. A	osed, flowing and shu es if gas to surface te	t-in pressu st, along v	ires, whether s vith final chart(:	hut-in pres	sure read	ched static level,	hydrostatic pre	essures, bottom h	ole temp	erature, fluid
Drill Stem Tests Taker		<u> </u>	es 🔽 No		L	og Formatio	n (Top), Depth	and Datum		Sample
Samples Sent to Geo	·	ΠYe	es 🗹 No		Name altomont			Top D: 764		Datum
Cores Taken	,		- 		oswego			1036		
Electric Log Run		₽ Y	_		Burg	•		1513		
Electric Log Submitte (If no, Submit Cop)		<u> </u>	es ☑ No		, -	issippi		1520		
List All E. Logs Run:										
		<u>.</u>	CASING	RECORD	Ne	w Used				
			<u>_</u>	conductor, s	urface, inte	ermediate, producti	i		1	
Purpose of String	Size Hole Drilled		e Casing (In O.D.)	We Lbs.		Setting Depth	Type of Cement	# Sacks Used		and Percent dditives
surface	12 5/8	8 5/8		new		24	portland	10		
production	6 3/4	4 1/2		new		1609	portland	160		
			ADDITIONAL	CEMENT	ING / SQL	JEEZE RECORD	<u> </u>		<u> </u>	
Purpose: Depth Type of Cement Top Bottom Type of Cement Perforate Protect Casing			of Cement	# Sacks Used Type			Type an	and Percent Additives		
Ptug Back TD Ptug Off Zone										
Shots Per Foot	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) Dep				Depth
2	1547.5 to155	3.5			<u>.</u>	1000 lbs.	frac sand			1547.5
		<u>. </u>								
								RECE		
							·	MAY 2	3 2011	
TUBING RECORD:	Size: 2 3/8	Set At: 1570		Packer	At:	Liner Run:	Yes 🗹	No KCC W	CHIT	A
Date of First, Resumed 10-23-10	d Production, SWD or El	IHA.	Producing Met	hod: Pumpi	ng _	Gas Lift (Other (Explain)			
Estimated Production Per 24 Hours	0ii 2	Bbls.	Gas trace	Mcf	War	er 8 300	bls.	Gas-Oil Ratio		Gravity 29
DISPOSIT	ION OF GAS:			METHOD O	F COMPL	ETION:		PRODUCTI	ON INTER	 VAL:
Vented Sol	d Used on Lease		Open Hole [Perf.	Duali (Submit		mmingled mit ACO-4)			
(If vented, St	ıbmit ACO-18.)		Other (Specily) _		(-carrist					



TICKET NUMBER 29321 LOCATION BARTHESUILLE, CK

OCATION BARTHSUILLE DK. OREMAN DONNIE TAKE

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

FIELD TICKET & TREATMENT REPORT CEMENT

					•			
DATE	CUSTOMER#	WEL	L NAME & NUMBE	R	SECTION	TOWNSHIP	RANGE	COUNTY
10/5/10		Kingid	#2. WIEST &	,				Mest. KS
CUSTOMER	ANDY RA	LKS		-				
MAILING ADDR	FIND F.A	40			TRUCK#	DRIVER	TRUCK#	DRIVER
			į		5.18	TAMES N		
CITY		STATE	ZIP CODE		417 787	THE F		
				•	Riells	80 VAC	•	
JOB TYPE	15	HOLE SIZE	63/4	l HOLE DEPTH	<u> </u>	CASING SIZE & W	EIGHT 41/2	<u> </u>
CASING DEPTH		DRILL PIPE		TUBING		CASING SIZE & N	OTHER	
SLURRY WEIGH		SLURRY VOL			k 8.5	CEMENT LEFT in		
DISPLACEMEN			NT PSI 4900 I				. 75	
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			11.00	111			T. A.	70 m
ACCOUNT	Τ	· · ·		1			<u>-</u>	
CODE	QUANIT	or UNITS	DES	CRIPTION of	SERVICES or PF	RODUCT	UNIT PRICE	TOTAL
5401		<u> </u>	PUMP CHARGE					425,00
54C6	-29		MILEAGE					105.85
5402	160	ડ	FOUTHGE					330 (0)
5407	/		BULK TRI	"CV				350,00
Sile		YHR	TRANS?	ET-				166.
5502C	,5	YHR	80 UNC					50. ^{ro}
	· ,	,						
1126A	1600	15040#	THIPK TE	. T	<u> </u>			272
1116.4	16.81/8	kro#	Kensede					336.00
/1c)A	55/	200#	PHNO			./		230.00
1/33	6720	CAL	CITY I AT	K.C		1-1-1		120.73
4404				ER PLIC	,	1/2/		
1118B	351/1	150	GEL		30	0- / 0	REC	A 661
		 				16-10-9)		
	1. 5	12		55646	<u>. 5</u>	<u> </u>	MAY 2	3 2011
	15/	1,0/2	Disc	1.6.	<u> 10</u>		1/00	
	10120	• •	Total A	5007.	42		KCC W	CHITA
	<u> </u>	·	-				<u></u>	100 1111
Ravin 3737	<u> </u>	()	1			<i>₹ 3%</i>	SALES TAX	143 44
				'حمرِ	, A-		ESTIMATED TOTAL	5564 02
AUTHORIZTION	V W W W	オンレー		IIILE <u>.</u>	ger!		DATE 10	5-70
l acknowledge	e that the paym	ent terms, un			9	the front of the f	· · ·	ustomer's
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account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



TICKET NUMBER 29327
LOCATION BARFIESWILL CK.
FOREMAN DOWNIE Take

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

FIELD TICKET & TREATMENT REPORT

			VLITILI	T)			
DATE	CUSTOMER#	WELL NAM	AE & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/5/10		Kineril #2.	MITSIR.				Mest. 15
CUSTOMER	A. sa D.	t .					ere en el se livre
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				411 T 37	Chancey		
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JOB TYPE CASING DEPTH				н	CASING SIZE & W		·
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			71/1/2				
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ACCOUNT CODE	QUANITY	or UNITS	DESCRIPTION	of SERVICES or PI	RODUCT	UNIT PRICE	TOTAL
5401	/	PUI	MP CHARGE				12500
5456	3.4		EAGE				105 85
5402	160	3 F	OCTABL				3.20.
5407	1		ILK TLUET				350.20
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Ravin 3737	11	01		1 A		ESTIMATED TOTAL	5564.02
AUTHORIZITON	Arty	and-	mile				7-70
ACTIONE 10	11	<u> </u>		<i>T</i>		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.



TICKET NUMBER 29327

LOCATION PARTHESIALE, EK

FOREMAN DOWNE TAKE

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

FIELD TICKET & TREATMENT REPORT CEMENT

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DATE	CUSTOMER#	WEL	L NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
10/5/10		Kingid	#2. MIESI	\mathcal{R}_{\cdot}				Most. 15
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MAILING ADDRE		łks	<u>.</u>	-	TRUCK#	DRIVER	TRUCK#	DRIVER
					4/9	JAMES N		
CITY		STATE	ZIP CODE	-	1/18	THEF F		
) 				_	4/19 T 87 Ricks			· · · · · · · · · · · · · · · · · · ·
JOB TYPE	1.5	HOLE SIZE	63/4	_ _ HOLE DEPTI		CASING SIZE & W	EIGHT 41/2	l
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DISPLACEMENT	-		NT PSI				, 75	<u> </u>
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ACCOUNT CODE	QUÂNITY	or UNITS	DE	SCRIPTION of	SERVICES or PR	RODUCT	UNIT PRICE	TOTAL
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5407			BULL TI	CHOL				350.00
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Ravin 3737	<u> </u>		<u> </u>			5.3%	SALES TAX	183.44
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AUTHORIZTION	11 may	ev		TILE !	7 1		DATE 10	2-70
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