



**CONFIDENTIAL**

OIL & GAS CONSERVATION DIVISION

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

**WELL COMPLETION FORM**

**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 5144  
 Name: Mull Drilling Company, Inc.  
 Address 1: 1700 N WATERFRONT PKWY  
 Address 2: BLDG 1200  
 City: WICHITA State: KS Zip: 67206 +  
 Contact Person: Mark Shreve  
 Phone: (316) 264-6366  
 CONTRACTOR: License # 33575  
 Name: WW Drilling, LLC  
 Wellsite Geologist: Macklin Armstrong  
 Purchaser: N/A

API No. 15 - 15-101-22301-00-00

Spot Description:  
SE NW SW NW Sec. 5 Twp. 19 S. R. 28  East  West  
1685 Feet from  North /  South Line of Section  
335 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW

County: Lane  
 Lease Name: Hineman Farms B Well #: 1-5

Field Name: Wildcat

Producing Formation: N/A

Elevation: Ground: 2775 Kelly Bushing: 2780

Total Depth: 4700 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 208 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.

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  WSW  SWD  SIOW  
 Gas  D&A  ENHR  SIGW  
 OG  GSW  Temp. Abd.  
 CM (Coal Bed Methane)  
 Cathodic  Other (Core, Expl., etc.): \_\_\_\_\_

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

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Deepening  Re-perf.  Conv. to ENHR  Conv. to SWD  
 Conv. to GSW

Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_

Commingled Permit #: \_\_\_\_\_

Dual Completion Permit #: \_\_\_\_\_

SWD Permit #: \_\_\_\_\_

ENHR Permit #: \_\_\_\_\_

GSW Permit #: \_\_\_\_\_

<u>07/13/2011</u>	<u>07/19/2011</u>	<u>07/19/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

**Drilling Fluid Management Plan**  
 (Data must be collected from the Reserve Pit)

Chloride content: 147200 ppm Fluid volume: 800 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**AFFIDAVIT**

I am the affiant and I hereby certify that 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.

Submitted Electronically

**KCC Office Use ONLY**

Letter of Confidentiality Received  
Date: 10/12/2011

Confidential Release Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT  I  II  III Approved by: NAOMI JAMES Date: 10/13/2011