



**CONFIDENTIAL**

**WELL COMPLETION FORM**

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

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

OPERATOR: License # 32933  
 Name: Miller, Todd dba Speedy Well Service  
 Address 1: 402 W ELM ST  
 Address 2: \_\_\_\_\_  
 City: SEDAN State: KS Zip: 67361 + 1219  
 Contact Person: Todd Miller  
 Phone: ( 620 ) 725-3631  
 CONTRACTOR: License # 5831  
 Name: M.O.K.A.T.  
 Wellsite Geologist: none  
 Purchaser: \_\_\_\_\_

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>05/28/2012</u>	<u>05/29/2012</u>	<u>06/06/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-019-27202-00-00  
 Spot Description:  
SW NE SW NE Sec. 25 Twp. 34 S. R. 11  East  West  
3356 Feet from  North /  South Line of Section  
1711 Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
 County: Chautauqua  
 Lease Name: JB and JS Huffman Well #: 500  
 Field Name: Peru-Sedan  
 Producing Formation: Wayside  
 Elevation: Ground: 903 Kelly Bushing: 905  
 Total Depth: 1163 Plug Back Total Depth: 1153  
 Amount of Surface Pipe Set and Cemented at: 40 Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set: \_\_\_\_\_ Feet  
 If Alternate II completion, cement circulated from: 1153  
 feet depth to: 0 w/ 120 sx cmt.

**Drilling Fluid Management Plan**  
 (Data must be collected from the Reserve Pit)  
 Chloride content: 0 ppm Fluid volume: 0 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: 07/25/2012  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
 ALT  I  II  III Approved by: Deanne Garrisor Date: 07/31/2012