

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31714  
 Name: Novy Oil & Gas, Inc.  
 Address 1: PO BOX 559  
 Address 2: \_\_\_\_\_  
 City: GODDARD State: KS Zip: 67052 + 0559  
 Contact Person: Michael Novy  
 Phone: ( 316 ) 265-4651  
 CONTRACTOR: License # 33549  
 Name: Landmark Drilling, LLC  
 Wellsite Geologist: None  
 Purchaser: NCRA  
 Designate Type of Completion:

New Well  Re-Entry  Workover  
 Oil  WSW  SWD  SLOW  
 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: McCoy Petroleum Corp  
 Well Name: Morgan - Yeakel Unit #1  
 Original Comp. Date: 02/19/2001 Original Total Depth: 3625  
 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 #: \_\_\_\_\_

01/30/2012	02/03/2012	03/20/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-155-21451-00-01  
 Spot Description:  
NE NE NW SW Sec. 17 Twp. 22 S. R. 8  East  West  
2490 Feet from  North /  South Line of Section  
3970 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County: Reno  
 Lease Name: morgan-yeakel Well #: 1

Field Name: \_\_\_\_\_  
 Producing Formation: Conglomerate  
 Elevation: Ground: 1701 Kelly Bushing: 1703  
 Total Depth: 3625 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at: 260 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 #: \_\_\_\_\_  
 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: \_\_\_\_\_  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
 ALT  I  II  III Approved by: Deanna Gernor Date: 08/23/2012



1091440

Operator Name: Novy Oil & Gas, Inc. Lease Name: morgan-yeakel Well #: 1  
 Sec. 17 Twp. 22 S. R. 8  East  West County: Reno

**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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	2928 -1225
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	BKC	3445 -1742
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Conglomerate	3524 -1821
List All E. Logs Run:		Kinderhook Shale	3560 -1857
gamma neutron			

CASING RECORD <input checked="" 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	12.25	8.625	24	260	60/40 poz	185	2% gel, 3%cc
production	7.875	5.5	14	3623	ASC	100	10%salt, 6% gip

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	3531 to 3537	none	3531-3537

TUBING RECORD:	Size: <u>2.875</u>	Set At: <u>3531</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.	Producing Method:			
<u>06/15/2012</u>	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	10	0	400	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i>	PRODUCTION INTERVAL: <u>3531-3537</u>
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### Summary of Changes

Lease Name and Number: morgan-yeakel 1

API/Permit #: 15-155-21451-00-01

Doc ID: 1091440

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved Date	05/11/2012	08/23/2012
Date of First or Resumed Production or SWD or Enhr Lease Name	morgan-yeakle	06/15/2012 morgan-yeakel
Save Link	../kcc/detail/operatorE ditDetail.cfm?docID=10 78349	../kcc/detail/operatorE ditDetail.cfm?docID=10 91440