



**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 # 34662  
 Name: Tug Hill Operating, LLC  
 Address 1: 550 BAILEY AVE, STE 510  
 Address 2: \_\_\_\_\_  
 City: FT. WORTH State: TX Zip: 76107 + \_\_\_\_\_  
 Contact Person: Winnie Scott  
 Phone: (817) 632-3400  
 CONTRACTOR: License # 34670  
 Name: Patterson-UTI Drilling Company LLC  
 Wellsite Geologist: NA  
 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

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

Commingled    Permit #: \_\_\_\_\_

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

SWD    Permit #: \_\_\_\_\_

ENHR    Permit #: \_\_\_\_\_

GSW    Permit #: \_\_\_\_\_

<u>07/08/2012</u>	<u>09/04/2012</u>	<u>09/08/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-033-21620-00-00

Spot Description: \_\_\_\_\_  
W2 SE SE SE Sec. 18 Twp. 34 S. R. 18  East  West  
330 Feet from  North /  South Line of Section  
510 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Comanche  
 Lease Name: Hoffman Family Trust Well #: 1 SWD  
 Field Name: \_\_\_\_\_

Producing Formation: Arbuckle  
 Elevation: Ground: 1936 Kelly Bushing: 23  
 Total Depth: 7730 Plug Back Total Depth: 7730  
 Amount of Surface Pipe Set and Cemented at: 771 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: 18000 ppm Fluid volume: 1300 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: 09/10/2012
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: NAOMI JAMES Date: 09/11/2012