



1096258

Operator Name: Kansas Resource Exploration & Development, LLC Lease Name: Knabe M Well #: KRI-15
 Sec. 15 Twp. 14 S. R. 22 East West County: Johnson

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray Neutron CCL | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Squirrel Sandstone 717' 312' |
|---|--|

| 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 | 9.875 | 7 | 19 | 21 | Portland | 5 | |
| Production | 5.625 | 2.875 | 6.5 | 749 | 50/50 Poz | 102 | |
| | | | | | | | |

| 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 (Amount and Kind of Material Used) | Depth |
|----------------|---|---|----------------|
| 3 | 717.0' - 724.0' 22 Perfs | 2" DML RTG | 717.0' - 724.0 |
| | | | |
| | | | |
| | | | |

| | |
|---|--|
| TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ | Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|--|

| | |
|---|---|
| Date of First, Resumed Production, SWD or ENHR. _____ | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____ |
| Estimated Production Per 24 Hours | Oil Bbbs. _____ Gas Mcf _____ Water Bbbs. _____ Gas-Oil Ratio _____ Gravity _____ |

| | | |
|---|--|--|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input 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 (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|--|



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 39502
LOCATION Oxtawa KS
FOREMAN Fred Maden

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

FIELD TICKET & TREATMENT REPORT
CEMENT

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY | |
|--|-------------|--------------------|-------------------------------|--------------|--------|-----------------------|----------------|
| 8/21/12 | 4448 | Kna be "M" KRI-15 | NE 15 | 14 | 22 | YO | |
| CUSTOMER Kansas Resources Expl & Dev. | | | TRUCK # DRIVER TRUCK # DRIVER | | | | |
| MAILING ADDRESS 5393 W 110th St | | | 506 | Fred Mad | Safety | Mdy | |
| CITY STATE ZIP CODE Overland Park KS 66210 | | | 666 | Ki Car | KC | | |
| | | | 505/7106 | Joe Ric | JR | | |
| | | | 548 | Mix Itoa | MH | | |
| JOB TYPE | Long string | HOLE SIZE | 5 7/8 | HOLE DEPTH | 765 | CASING SIZE & WEIGHT | 2 1/2 EUE |
| CASING DEPTH | 749' | DRILL PIPE | | TUBING | | OTHER | |
| SLURRY WEIGHT | | SLURRY VOL | | WATER gal/sk | | CEMENT LEFT in CASING | 3-2 1/2" Plugs |
| DISPLACEMENT | 435BBL | DISPLACEMENT PSI | | MIX PSI | | RATE | 4 BPM |
| REMARKS: Establish pump rate. Mix Pump 100' Gel Flush. Mix Pump 102 SKS 50/50 Por Mix Cement 2 1/2 Gal. 1/2" Plug Seal/SK. Cement to surface Flush pump + lines clean. Displace 2-2 1/2" rubber plugs to casing TD. Pressure to 800 PSI. Release pressure to set float valve. Shut M Casng | | | | | | | |

Utah Drilling Rig 2

Fred Maden

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|------------------|--------------------|
| 5401 | 1 | PUMP CHARGE | 666 | 1030 ⁰⁰ |
| 5406 | 30 mi | MILEAGE | 666 | 120 ⁰⁰ |
| 5402 | 749' | Casing footage | | N/C |
| 5407 | 1/2 Minimum | Ten Miles | 548 | 175 ⁰⁰ |
| 5501C | 1 1/2 hr | Transport | 505/7106 | 168 ⁰⁰ |
| 1124 | 102 SKS | 50/50 Por Mix Cement | | 1116 ²⁰ |
| 1118A | 222 th | Premium Gel | | 57 ^{L2} |
| 1107A | 5 th | Plug Seal | | 65 ⁷⁹ |
| 4402 | 2 | 2 1/2" Rubber Plugs | | 56 ⁰⁰ |
| | | | 7.5025 SALES TAX | 97 ⁵¹ |
| | | | ESTIMATED TOTAL | 2886 ³³ |

Ravin 3737

AUTHORIZATION JMKW TITLE _____ 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

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