



Confidentiality Requested:  
 Yes  No

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # \_\_\_\_\_

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

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

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

Wellsite Geologist: \_\_\_\_\_

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       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

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

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE       NW       SE       SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

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

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No  List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*  
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*  
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR: \_\_\_\_\_ Producing Method:  
 Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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## Black Tea Oil, LLC

Lease: DFK #1

Description: New well completion

Sec.2 Twp. 15S Rng. 32W

County: Logan

KB- 9'

T.D.- 4369'

Port collar- 2084' sks-390

5 1/2- 4398' sks- 200

Perfs: Morrow- 4332-40', 4315-26', Johnson- 4264-74', Pawnee- 4140-48', L- 3976-82', J- 3913-24', C- 3716-22', 4 spf 39 gram,

Tubing: Mud anchor= 1 full joint- 4225', perf. sub, ceet Nipple, 10 jts, Tubing anchor- 3905', 119 joints on top, total ran 130 including mud anchor.

Pump: 2 1/2 x 2 x 14' RWT

Rods:

6/27/14

MIRU Express well service, MIRU Dans Packer and RIh with shifting tool, located port collar @ 2084', MIRU Allied cementing, cemented port collar with 390 sks, ran 7 joints and washed clean, pulled tubing, shut down at 8:00 pm.

6/30/14

Rigged up casing swab and swabbed well dry to 4369', MIRU K&L Tank Service and dropped 35 bbl sw to perforate in, MIRU Pioneer wireline and perforated the Morrow- 4332-40', 4315-26', Johnson- 4264-74', Pawnee- 4140-48', L- 3976-82', J- 3913-24', C- 3716-22', 4 spf 39 gram, lost last set of guns in hole( pulled out of rope socket), called for fishing tools, couldnt get tools til 9:00 pm, shut down.

7/1/14

RIH with overshot and got a hold of guns and came out of the hole, MIRU Dans Packer and RIH with Plug and packer and isolated the morrow- 4332-40', 4315-26', MIRU Kansas Acid and treated with 3000 gal 15% INS, broke at 1400#, feeding .3 bbl min at 800#, slowly inc. rate to 4.5 bbl min at 1200#, ISIP- 700#, total load- 97 bbl, flowed back 35 bbl, moved tools up and treated the Johnson- 4264-74', with 1500 gal 15% INS, broke at 1400#, feeding .3 bbl min- 750#, inc. rate slowly to 4 bbl min- 1400#, ISIP- 700#, total load- 76 bbl, flowed back 10 bbl, isolated both the morrow and johnson and swab tested. Swab down- 33.81 bbl, 1st hour- 15 bbl- 25% oil, released tools and came out of the hole, RBIH with Big Bore Model R, MIRU Kansas Acid and spotted 1500 gal diesel, shut down.

7/2/14

MIRU Gore Nitrogen, did a 43000 # Nitrogen sand Frac, Avg. rate- 12 bbl min, Avg. press.- 2971', Max press.- 3218#, ISIP- 2308#, 15 min down to 1906#, total load- 452 bbl, Shut well in overnight.

7/3/14

Checked overnight shut in pressure- 1700#, started flow back at 50% choke:

1st hour- 31.73 bbl- 15% oil- Flowing

2nd hour-8.35 bbl-40% oil- Flowing

3rd hour- 3.34 bbl- 39% oil- Flowing

4th hour- 21.73 bbl- 40% oil- swabbing FL- 2500' down

5th hour- 16 bbl- 42% oil- swabbing FL- 2500' down

6th hour- 8 bbl- 62% oil- swabbing( cups had hole in them) FL- 2500' down

7th hour- 35.25 bbl- 50% oil- swabbing FL-2500' down

8th hour- 31.75 bbl- 60% oil- swabbing FL 2500' down

Shut down at 6:30 PM

7/7/14

Checked overweekend tubing pressure- 700#, released packer and came out of the hole, RIH with plug and packer and isolated the pawnee, MIRU Kansas Acid and and treated with 1500 gal 15% INS 2.5 bbl min- 700#, ISIP-400#, total load- 60 bbl, flowed back 20 bbl, swab down 11.69 bbl, 25% oil, testing 140'- 25% oil each pull, moved tools up and isolated the L, MIRU Kansas Acid and treated with 1500 gal 15% INS, feeding at 500#- .3 bbl min, inc. rate to 1 bbl min- 500#, ISIP- 300#, Total load- 59 bbl, swab down- 26 bbl, no show, RBIH and rec. 50' scum of oil. shut down.

7/8/14

Checked pressure on tubing- 120#, FL- 2400' from surface with 120' oil, swab down- 9.18 bbl, 1st hour- .75 bbl scum of oil, released packer and swabbed steady and rec. 33.75 bbl with a show of oil, moved tools up and isolated the J-zone MIRU Kansas Acid and treated with 1500 gal 15% INS, feeding at 1 bbl min- 400#, left rate at 1 bbl min pressure slowly inc. to 800#, ISIP- 600#, swabbed for 1 hour and rec. 41.75 bbl @ 90% oil, light gassy oil, 2nd hour- 24 bbl - 94% oil, FL- 2700' from surface, moved tools up and isolated the C zone, MIRU Kansas

Acid and treated with 1500 gal 15% INS, broke at 800#-.5 bbl min, inc. rate to 1 bbl min- 700#, press broke back to 650#, inc rate to 1.5 bbl min- 700#, ISIP- 400# total load- 60 bbl, flowed back 11 bbl swab down- 22 bbl, last pull rec. 50' no show of oil, shut down.

7/9/14

Checked tubing pressure- 50#, FL- 1800' down, show of oil, swabbed dry, released tools and came out of hole, MIRU Dans Packer and RIH with Bulldog bailer and cleaned out to TD- 4369', pulled bailer and tubing, RIH with Mud anchor= 1 full joint, perforated sub, ceetnipple, 10 joints, tubing anchor- 3905', 119 joints on top, shut down.

7/10/14

RIH with swab, FL- 1100' from surface with 2000' of oil, swabbed for 1 hour and rec.- 24 bbl all oil, RIH with 2" pump and rods, long stroked well, had good blow, RDMO.

## Summary of Changes

Lease Name and Number: DFK 1 1

API/Permit #: 15-109-21304-00-00

Doc ID: 1248329

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Amount of Surface Pipe Set and Cemented at	250	266
Approved Date	08/11/2014	04/27/2015
CasingAdd_Type_PctP DF_1		COMMON
CasingAdd_Type_PctP DF_2		COMMON
CasingPurposeOfString PDF_1	SURFACE	Surface
CasingPurposeOfString PDF_2	PRODUCTION	Production
CasingSettingDepthPD F_1	250	266
CasingSettingDepthPD F_2	4500	419
CasingWeightPDF_1	16	23
CasingWeightPDF_2	20	15.5



Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
If Alternate II Completion - Cement Circulated From		2085
If Alternate II Completion - Cement Circulated To		0
If Alternate II Completion - Sacks of Cement		390
Method Of Completion - Commingled	No	Yes
Multiple Stage Cementing Collar Depth	2100	2085
Perf_Depth_1		see attached report
Perf_Material_1		see attached report
Perf_Record_1		see attached report
Producing Formation	KANSAS CITY / JOHNSON	See attached report
Save Link	../../../../kcc/detail/operatorEditDetail.cfm?docID=1218084	../../../../kcc/detail/operatorEditDetail.cfm?docID=1248329
TopsDatum1	-1307	-1639
TopsDatum2		-1588
TopsDatum3		-1464

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
TopsDatum4		-1040
TopsDepth1	3983	4315
TopsDepth2		4264
TopsDepth3		4140
TopsDepth4		3716
TopsName1	KANSAS CITY	morrow
TopsName2		johnson
TopsName3		pawnee
TopsName4		kansas city
Total Depth	4500	4419

## Summary of Attachments

Lease Name and Number: DFK 1 1

API: 15-109-21304-00-00

Doc ID: 1248329

Correction Number: 1

Attachment Name



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1218084  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed

Form must be Signed

All blanks must be Filled

# CONFIDENTIAL WELL COMPLETION FORM

## WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # \_\_\_\_\_

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

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

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

Wellsite Geologist: \_\_\_\_\_

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       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

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

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE       NW       SE       SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

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

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to [kcc-well-logs@kcc.ks.gov](mailto:kcc-well-logs@kcc.ks.gov). Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input 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

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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# ALLIED OIL & GAS SERVICES, LLC 064018

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT:  
Oakley KS

DATE <u>6-18-14</u>	SEC <u>2</u>	TWP <u>15</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION <u>8:00pm</u>	JOB START <u>8:15pm</u>	JOB FINISH <u>5:30pm</u>
LEASE <u>DFK</u>	WELL# <u>1</u>	LOCATION <u>Oakley 23 S to gold Rd</u>			COUNTY <u>Logan</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)				<u>E into</u>			

CONTRACTOR Landmark Co  
 TYPE OF JOB Surface  
 HOLE SIZE 12 1/4 T.D. 2666'  
 CASING SIZE 8 5/8 DEPTH 27896'  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. 15'  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT 16.81 bbl H<sub>2</sub>O  
 EQUIPMENT \_\_\_\_\_

OWNER Same  
 CEMENT AMOUNT ORDERED 180 sks Corn 3/CC 2 1/2 gel

PUMP TRUCK CEMENTER Paul Beaver  
 # 120 HELPER Tyler Flipse  
 BULK TRUCK # 891 DRIVER Juan 2 TWS  
 BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>180 sks @ 17.90</u>	<u>3222.00</u>
POZMIX	_____ @ _____	_____
GEL	<u>335 @ 1.05</u>	<u>354.75</u>
CHLORIDE	<u>507 @ 1.10</u>	<u>557.70</u>
ASC	_____ @ _____	_____
MATERIAL TOTAL	_____	<u>4134.60</u>
( <u>206.90 / 80 @</u> )	_____	_____
HANDLING	<u>194.62 @ 2.48</u>	<u>482.66</u>
MILEAGE	<u>8.88 hrs x 25mi @ 2.75</u>	<u>242.50</u>

REMARKS:  
mix 180 sks Corn 3/CC 2 1/2 gel  
Displace w/ water

cement did circulate

CHARGE TO: Black Tea  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

*Thank You!  
Paul & Tyler*

TOTAL \_\_\_\_\_

SERVICE

DEPTH OF JOB	_____	_____
PUMP TRUCK CHARGE	_____	<u>152.25</u>
EXTRA FOOTAGE	_____ @ _____	_____
MILEAGE MILV	<u>25 @ 7.70</u>	<u>192.50</u>
MANIFOLD <u>head</u>	_____ @ _____	<u>275.00</u>
MILV	<u>25 @ 4.40</u>	<u>110.00</u>
( <u>636.58 / 208</u> )	_____	_____

TOTAL 3182.91

To: Allied Oil & Gas Services, LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Ramiro Maldonado  
 SIGNATURE Ramiro Maldonado

PLUG & FLOAT EQUIPMENT

_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____

TOTAL \_\_\_\_\_

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES 7,317.51

DISCOUNT 1,463.50 (20%) IF PAID IN 30 DAYS  
5,854.00 Net.



Services, Inc.

TICKET 26372

CHARGE TO: **BLACK TEA OIL**  
 ADDRESS  
 CITY, STATE, ZIP CODE

PAGE 1 OF 2

SERVICE LOCATION: **NESS City, KS** WELL/PROJECT NO.: **101** LEADER: **DAKLEY, KS** COUNTY: **LANSH** STATE: **KS** CITY: **DAKLEY, KS** DATE: **24 JUN 14** OWNER: **5.70 RIVER BRIDGE, 1/2 S E 20 N**

TICKET TYPE: **CONTRACTOR** CONTRACTOR: **LANDMARK DRILLING #10** RIG NAME/NO.: **LOGAN** SHIPPED VIA: **DELIVERED TO** ORDER NO.: **5.70 RIVER BRIDGE, 1/2 S E 20 N**

WELL TYPE: **OIL** WELL CATEGORY: **DEVELOPMENT** JOB PURPOSE: **5 1/2 HOUR STRIK** WELL PERMIT NO.:

INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575					MILEAGE #115	80	mi			6	480
578					Pump Charge	1500				1500	1500
402					CENTRALIZERS	8	EA.			70	560
403					CEMENT BASKET	3	EA.			300	900
404					PORT COLLAR	1	EA.			2900	2900
406					LATCH DOWN PLUG & BARGE	1	EA.			275	275
407					INSERT FLOAT SHOE W/ FILL	1	EA.			375	375
419					ROTATING HEAD RENTAL	1	EA.			200	200
<del>281</del>					MUD FLUSH	500	gal			1.35	675
221					LIQUID RCL	2	gal			25	50

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: **24 Jun 14** TIME SIGNED: **12:00**  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UN-DECIDED	DIS-AGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES		<input type="checkbox"/> NO

PAGE TOTAL: **2** TOTAL: **14,747.51**

SWIFT OPERATOR: **Joe Parry** APPROVAL: **Joe Parry**

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.

Thank You!





PO Box 466  
Ness City KS 67560  
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 26372

CUSTOMER BUNKER TEA OIL

WELL DFK 1 & 1

DATE 2/5/14 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			QTY	U/M	QTY	U/M		
276							600	lbs			2.50	1500.00
283						FUDGE SALT	1150	lbs			30	230.00
284						VALSAL	11	bx			35	385.00
285						CFR-1	100	lbs			4.50	450.00
290						D-AIR	2 1/2	gal			42.00	105.00
325						STANDARD EA-2	230	bx			14.50	3335.00
581						SERVICE CHARGE					2.00	460.00
583						MILEAGE CHARGE	24030				1.90	961.20
							CUBIC FEET	2305x				
							LOADS	80				
							TOTAL WEIGHT	961.20				
							TON MILES					

CONTINUATION TOTAL 6076.20

JOB LOG

SWIFT Services, Inc.

DATE 24 JUN 14 PAGE NO.

CUSTOMER BLACK TEA OIL WELL NO. LEASE DEK 1#1 JOB TYPE 5 1/2 LONGSTRING TICKET NO. 26372

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1100							ON LOCATION
	1235							START PIPE 5 1/2 - 15.5 # RTD @ 4419 SHOE JT. 19.64 CENTRALIZERS 1,3,5,7,9,11,13, 56 BASKET 2, 54, 55 PORT COLLAR @ # 55 @ 2085
	1435							DROP BALL - CIRCULATE
	1524	6	12		✓		300	Pump 500 gal mud FLUSH
		6	20		✓		300	Pump 20 BBL KCL SPACER
	1530		37		✓			PLUG RH 30 SX
	1537	4	48		✓			MIX 200 SX EA-2
	1551							WASH OUT Pump & LINES
	1555	6			✓			START DISPLACING PLUG.
	1612	8	105		✓		1500	PLUG DOWN LATCH PLUG IN
	1615				✓			RELEASE PSI - DRY
								WASH TRUCK
	1700							JOB COMPLETE THANKS  JASON DOUG JARED