



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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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## Summary of Changes

Lease Name and Number: Coburn 6-8

API/Permit #: 15-179-21360-00-00

Doc ID: 1294542

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved By	NAOMI JAMES	Karen Ritter
Approved Date	08/19/2014	03/02/2016
Save Link	../../kcc/detail/operatorEditDetail.cfm?docID=1217210	../../kcc/detail/operatorEditDetail.cfm?docID=1294542
Well Type	DH	OIL



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1217210  
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

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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.

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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
--	---

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)</i> <i>(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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# GLOBAL CEMENTING, L.L.C.

1350

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
6-5-14						1:45pm	1:30pm
LEASE <u>Coburn</u>	WELL# <u>6-8</u>	LOCATION				COUNTY <u>Sheridan</u>	STATE <u>KS</u>
OLD OR NEW (CIRCLE ONE)							

CONTRACTOR <u>American Eagle</u>	OWNER
TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>12 1/4</u>	T.D.
CASING SIZE <u>8 5/8</u>	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <u>250psi</u>	MINIMUM <u>100psi</u>
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>20ft</u>	
PERFS	
DISPLACEMENT <u>15.5 bbl</u>	EQUIPMENT
PUMP TRUCK # <u>P1</u>	CEMENTER <u>Heath</u>
	HELPER <u>Cody - Brad</u>
BULK TRUCK # <u>B4</u>	DRIVER <u>F.C.C.</u>
BULK TRUCK #	DRIVER

CEMENT AMOUNT ORDERED <u>200sx com 3%cc</u>	
<u>2 bagel</u>	
COMMON	@
POZMIX	@
GEL	@
CHLORIDE	@
ASC	@
	@
	@
	@
	@
	@
	@
	@
	@
HANDLING	@
MILEAGE	@
TOTAL	

### REMARKS:

Run to 115 of 8 5/8 casing and landing  
1st circulation with mud pump  
Hooked up and mixed 200sx and disp  
15.5 bbl of H2O - shut in @ 250psi  
Cement did circulate

CHARGE TO: Culbreath  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Cementing, L.L.C.,  
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 \_\_\_\_\_  
SIGNATURE Brendford Parker

### SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	
EXTRA FOOTAGE	@
MILEAGE <u>29K2</u>	@
MANIFOLD	@
	@
	@
TOTAL	

### PLUG & FLOAT EQUIPMENT

	@
	@
	@
	@
	@
TOTAL	

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES \_\_\_\_\_  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS







# GLOBAL CEMENTING, L.L.C.

1361

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT: Russell, MO

DATE <u>6-14-14</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>5:15am</u>	JOB FINISH <u>6:15am</u>
LEASE <u>Culbren</u>	WELL #. <u>6-8</u>	LOCATION				COUNTY <u>Shannon</u>	STATE <u>MO</u>
OLD OR <u>NEW</u> (CIRCLE ONE)							

CONTRACTOR American Eagle

TYPE OF JOB Log String 2-Stage

HOLE SIZE 5 7/8 T.D. \_\_\_\_\_

CASING SIZE 5 7/8 DEPTH \_\_\_\_\_

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

EQUIPMENT \_\_\_\_\_

PUMP TRUCK # P1 CEMENTER Heath

BULK TRUCK # B1 HELPER Brad

BULK TRUCK # \_\_\_\_\_ DRIVER Eric

BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED 2405' 60/40 6% gel

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

ASC \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

REMARKS:

Hook up and pump 500gal mud flush - and  
10 bbl K2 - mix 375' 60/40 6% gel and  
plug RH @ 305' - wash pump and lines clean  
and disp 53.2 bbl H2O - plug landed @  
1200 ps - released and held

Cement did circulate to surface

CHARGE TO: Culbreath

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Cementing, L.L.C.,  
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. Thank you.

PRINTED NAME \_\_\_\_\_

SIGNATURE [Signature]

SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

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

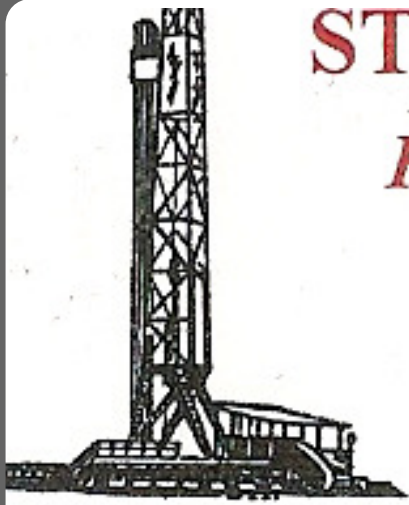
TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS



# STEVEN P. MURPHY, P.G.

*Petroleum Geologist (KS #228)*



Cell 620.639.3030

Fax 785.387.2400

RR#1, Box 69

Otis, Kansas 67565

geomurphy@gbta.net

Scale 1:240 (5"=100') Imperial  
Measured Depth Log

Well Name: Coburn #6-8  
API: 15-179-21360-00-00

Location: Sheridan County

License Number: 34344

Spud Date: 6/3/2014

Region: Kansas

Drilling Completed: 6/12/2014

Surface Coordinates: 330' FNL & 1650' FWL (Approx. NW NE NW)  
Section 8-T10S-R26W

Bottom Hole Coordinates: Same as above (Vertical well w/min deviation)

Ground Elevation (ft): 2597'

K.B. Elevation (ft): 2604'

Logged Interval (ft): 3550 To: TD

Total Depth (ft): LTD - 4274'

Formation: Topeka through Pawnee

Type of Drilling Fluid: Chemical

Printed by STRIP.LOG from WellSight Systems 1-800-447-1534 www.WellSight.com

## OPERATOR

Company: Culbreath Oil & Gas, LLC  
Address: 1532 S. Peoria Ave  
Tulsa, OK 74120-6202

## GEOLOGIST

Name: Steven P. Murphy, PG (KS License #228) & Anthony Luna  
Company: Consulting Petroleum Geologist  
Address: 3365 CR 390  
Otis, KS 67565

## LogTops (Datum)

Open-hole logging was performed by Pioneer Log-Tech. The following are formation tops w/associated datums:

Anhydrite Top - 2220 (+384)  
Anhydrite Base - 2256 (+348)  
Topeka - 3587 (-983)  
Heebner - 3802 (-1198)  
Toronto - 3826 (-1222)  
Lansing - 3842 (-1238)  
Muncie Creek - 3958 (-1354)  
Stark - 4027 (-1423)  
Base KC - 4074 (-1470)  
Pawnee - 4222 (-1618)

## DSTs

Drillstem testing was performed by Trilobite Testing (Hays shop):

### DST #1 3852-3870 (LKC "B")

30:60:30:60

IF: Wk blow built to 2", no return

FF: No blow, no return

Recovery: 35' mud (100%M)

IHP: 1884      FHP: 1861

IFP: 36-135    ISIP: 172

FFP: 120-158   FSIP: 158

BHT - 118 F

### DST#2 - 3864-3902 (LKC "DE")

Packer Failure

### DST #3 3870-3902 (LKC "DE")

30:30:30:30

IF: Wk blow built to 1/4", no return

FF: Surface blow died in 15min, no return

Recovery: 1' SOCM (2% CO, 98%M)

IHP: 1881      FHP: 1847

IFP: 26-28      ISIP: 68

FFP: 27-28      FSIP: 40

BHT - 109 F

### DST #4 3946-3978 (LKC "H")

30:30:30:30

IF: wk blow 1/4" to 1/2", no return

FF: No blow, no return

Recovery: 2' SOCM (1%O, 99%M)

IHP: 1920      FHP: 1873

IFP: 18-29      ISIP: 224

FFP: 29-29      FSIP: 122

BHT - 114 F

### DST #5 4020-4042 (LKC "K")

30:60:30:90

IF: BOB 5min, 1 1/2" return

FF: BOB 6min, 1 1/2" return

Recovery: 1270' GIP, 340' CO, 62' MGO (15%G, 50%O, 35%M)

IHP: 1965      FHP: 1931

IFP: 67-133    ISIP: 1070

FFP: 113-164   FSIP: 1053

Oil Gravity - 31

BHT - 126

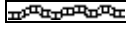
## COMMENTS

Based on the results of DSTs and log & sample analysis, 5-1/2" casing was set for production.

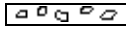
## ROCK TYPES



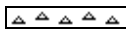
Anhy



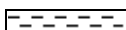
Bent



Brec



Cht



Clyst



Coal



Congl



Dol



Gyp



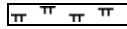
Igne



Lmst



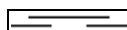
Meta



Mrlst



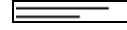
Salt



Shale



Shcol



Shgy



Sltst



Ss



Till

## OTHER SYMBOLS

### OIL SHOW

- Even
- Spotted
- Ques



Dead



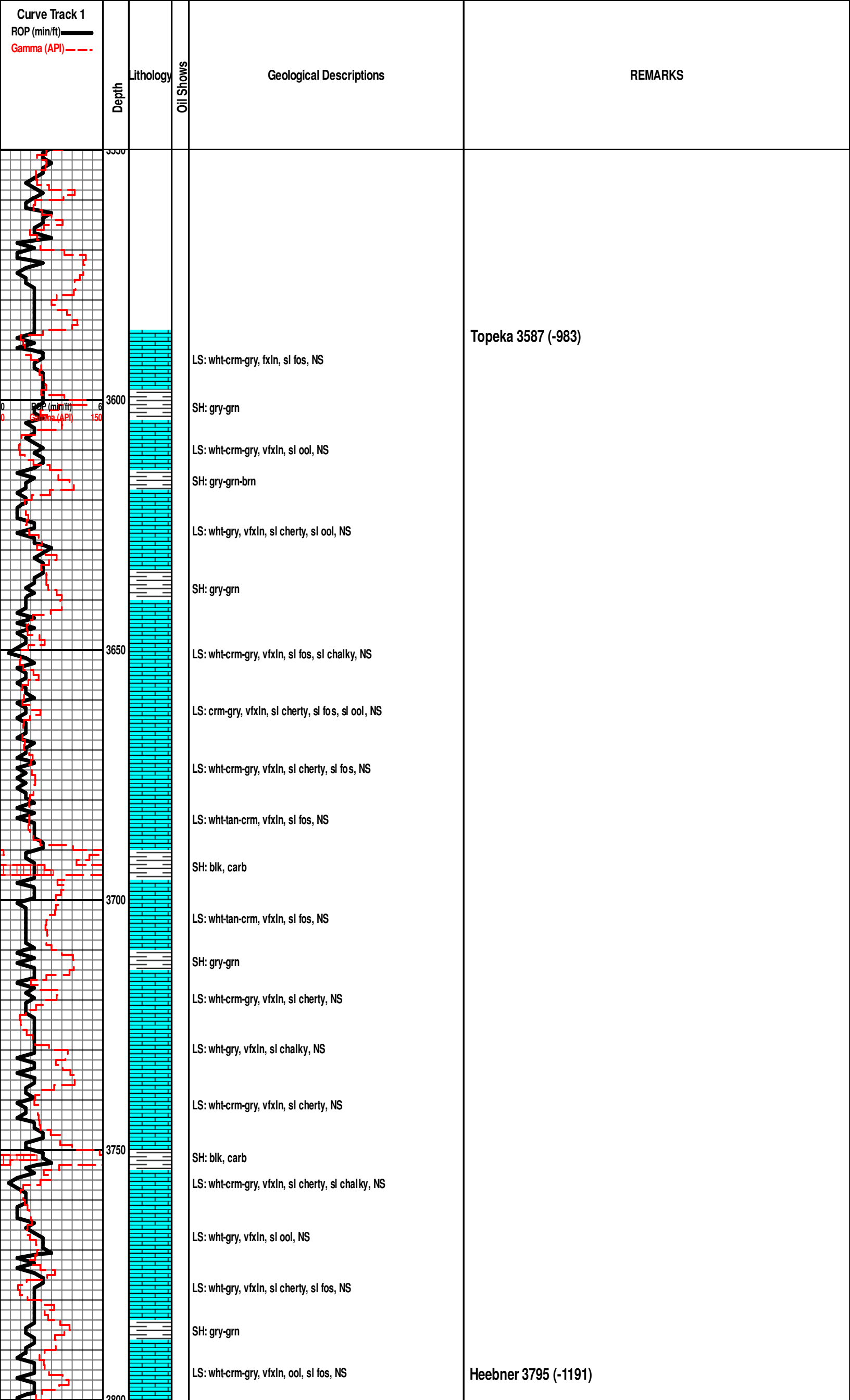
Gas

### INTERVAL

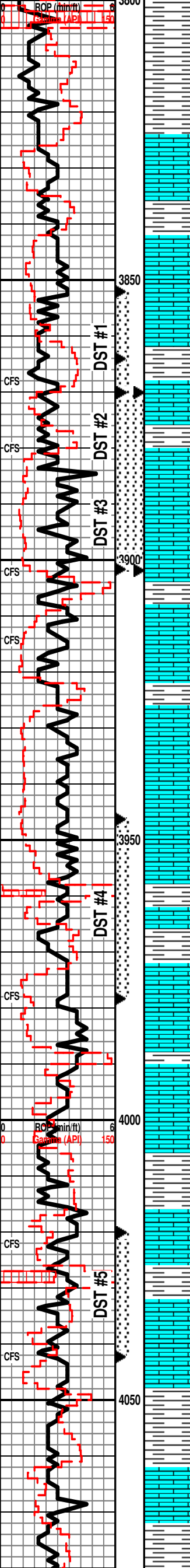
- Core
- Dst

### EVENT

- Conn
- Rft
- Sidewall







SH: blk, carb

SH: gry-grn-blk

LS: wht-crm-gry, vfxln, sl ool, sl fos, NS

SH: gry-grn

LS: wht-crm-gry, vfxln, sl ool, sl fos, NS

LS: wht-crm-gry, vfxln, sl cherty, sl ool, sl fos, NS

LS: wht-crm-gry, fxl, pr-fr intr-xln por, tight, fr-gd intr-ool por, few vugs, gsfo on brk, wk odor

SH: gry

LS: wht-gry, vfxln, sl chalky, pr intr-ool por, dense, tr fo on brk, faint odor

LS: wht-gry, fxl-vfxln, fr intr-xln por, few vugs, ssfo, gd odor

SH: gry-grn

LS: wht-gry, fxl, pr-fr intr-ool por, tr fo on brk, fr odor

LS: wht-crm-gry, vfxln, pr-fr intr-ool por, dense, tr fo on brk, wk odor

SH: gry-grn-brn

LS: wht-crm-gry, vfxln, dense, sl ool, NS

LS: same as above

SH: blk, carb

LS: wht-gry, vfxln, sl cherty, ool, NS

SH: gry-grn-brn-blk

LS: wht-crm-gry, vfxln, pr intr-ool por, dense, few vugs, tr fo on brk, sl odor

SH: gry-grn

LS: wht-crm-gry, vfxln, dense, sl cherty, NS

LS: wht-gry, vfxln, sl ool, sl fos, NS

SH: gry-grn-brn

LS: wht-crm-gry, vfxln, dense, sl ool, sl fos, flaky-tarry stn, no odor

SH: blk, carb

LS: wht-crm-gry, vfxln, fr intr-ool por, pp-vuggy, ssfo, fr odor

LS: same as above

SH: gry-grn-brn-blk

SH: gry-grn-brn

LS: why-crm-gry, vfxln, sl cherty, sl chalky, NS

SH: gry-grn-brn-blk

**Toronto 3819 (-1215)**

**Lansing 3834 (-1230)**

DST #1 3852-3870 (LKC "B")  
 30:60:30:90  
 IF: Wk blow built to 2", no return  
 FF: No blow, no return  
 Recovery: 35' mud (100% M)  
 IHP: 1884      FHP: 1861  
 IFP: 36-135    ISIP: 172  
 FFP: 120-158   FSIP: 158  
 BHT - 118 F

Strap @ 3870' - 1.71' long  
 Survey - 1 degree

DST #2 3864-3902 (LKC "DE")  
 (Packer Failed)

DST #3 3870-3902 (LKC "DE")  
 30:30:30:30  
 IF: Wk blow built to 1/4", no return  
 FF: Surface blow died in 15min, no return  
 Recovery: 1' SOCM (2% CO, 98%M)  
 IHP: 1881      FHP: 1847  
 IFP: 26-28      ISIP: 68  
 FFP: 27-28      FSIP: 40  
 BHT - 109 F

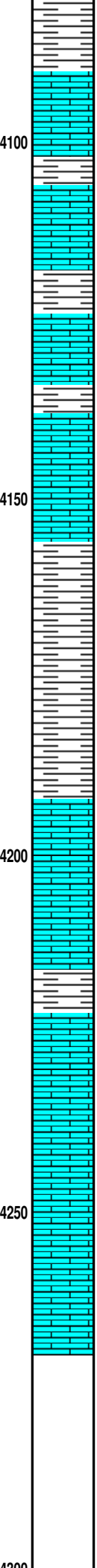
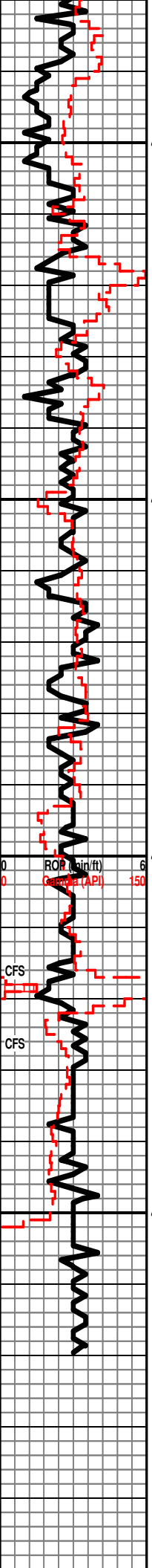
**Muncie Creek 3952 (-1348)**

DST #4 3946-3978 (LKC "H")  
 30:30:30:30  
 IF: Wk blow 1/4" to 1/2", no return  
 FF: No blow, no return  
 Recovery: 2' SOCM (1% O, 99%M)  
 IHP: 1920      FHP: 1873  
 IFP: 18-29      ISIP: 224  
 FFP: 29-29      FSIP: 122  
 BHT - 114 F

**Stark 4024 (-1420)**

DST #5 4020-4042 (LKC "K")  
 30:60:30:90  
 IF: BOB 5min, 1 1/2" return  
 FF: BOB 6min, 1 1/2" return  
 Recovery: 1270' GIP, 340' CO, 62' MGO  
 (15%G, 50%O, 35%M)  
 IHP: 1965      FHP: 1931  
 IFP: 67-133    ISIP: 1070  
 FFP: 113-164   FSIP: 1053  
 Oil Gravity - 31  
 BHT - 126

**BKC 4070 (-1466)**



SH: gry-grn-brn

LS: wht-tan-gry, vfxln, sl cherty, NS

4100

SH: gry-grn-brn

LS: wht-crm-gry, vfxln, sl cherty, sl chalky, NS

SH: gry-grn-brn (wash red)

LS: wht-tan-gry, vfxln, sl ool, sl fos, NS (wash red)

SH: gry-grn-brn (wash red)

4150

LS: wht-crm-gry, vfxln, sl fos, NS

SH: gry-grn-brn

SH: same as above

LS: wht-tan-gry, fxl, sl fos, NS

4200

LS: same as above

SH: blk

Pawnee 4222 (-1618)

LS: wht-tan-gry, vfxln, dense, sl cherty, sl fos, minor stns, nsfo, no odor

LS: wht-crm-tan, vfxln, sl cherty, sl chalky, NS

LS: wht-crm-gry, fxl, sl cherty, sl chalky, sl fos, NS

4250

LS: same as above

LS: wht-crm-gry, sl cherty, NS

Survey @ TD - 1 degree

RTD - 4270'

LTD - 4274'

4200