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Document Number:  
 400223078

**DRILLING COMPLETION REPORT**

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type  Final completion  Preliminary completion

1. OGCC Operator Number: 61250 4. Contact Name: MARK SHREVE  
 2. Name of Operator: MULL DRILLING COMPANY INC Phone: (316) 264-6366  
 3. Address: 1700 N WATERFRONT PKWY B#1200 Fax: (316) 264-6440  
 City: WICHITA State: KS Zip: 67206-

5. API Number 05-017-07707-00 6. County: CHEYENNE  
 7. Well Name: STATE-SCHEIMER Well Number: 1-16  
 8. Location: QtrQtr: SWNE Section: 16 Township: 16S Range: 46W Meridian: 6  
 Footage at surface: Distance: 1457 feet Direction: FNL Distance: 2494 feet Direction: FEL  
 As Drilled Latitude: 38.667250 As Drilled Longitude: -102.574880

GPS Data:  
 Date of Measurement: 11/11/2011 PDOP Reading: 2.7 GPS Instrument Operator's Name: KEITH WESTFALL

\*\* If directional footage at Top of Prod. Zone Dist.: \_\_\_\_\_ feet. Direction: \_\_\_\_\_ Dist.: \_\_\_\_\_ feet. Direction: \_\_\_\_\_  
 Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_  
 \*\* If directional footage at Bottom Hole Dist.: \_\_\_\_\_ feet. Direction: \_\_\_\_\_ Dist.: \_\_\_\_\_ feet. Direction: \_\_\_\_\_  
 Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

9. Field Name: WILDCAT 10. Field Number: 99999  
 11. Federal, Indian or State Lease Number: 8572.5

12. Spud Date: (when the 1st bit hit the dirt) 10/07/2011 13. Date TD: 10/21/2011 14. Date Casing Set or D&A: 10/22/2011

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 5420 TVD\*\* \_\_\_\_\_ 17 Plug Back Total Depth MD 5302 TVD\*\* \_\_\_\_\_

18. Elevations GR 4190 KB 4201 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:  
 CDL/CNL/PE  
 DIL  
 MICRO  
 SONIC

20. Casing, Liner and Cement:

**CASING**

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	20	0	526	360	0	360	CALC
1ST	7+7/8	5+1/2	17	3790	5,350	205	3,790	5,350	CBL

### STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 10/28/2011

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
STAGE TOOL	1ST	2,733	235	250	235

Details of work:

21. Formation log intervals and test zones:

#### FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
SHAWNEE	3,824		<input type="checkbox"/>	<input type="checkbox"/>	
HEEBNER	4,034		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING	4,088		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	4,482		<input type="checkbox"/>	<input type="checkbox"/>	
FORT SCOTT	4,553		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	4,614		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	4,778		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	4,944		<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	5,116		<input type="checkbox"/>	<input type="checkbox"/>	
SPERGEN	5,232		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WARSAW	5,362		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
HARRISON	5,380		<input type="checkbox"/>	<input type="checkbox"/>	
OSAGE	5,394		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_

Print Name: MARK SHREVETitle: PRESIDENT/COODate: 11/15/2011Email: MSHREVE@MULLDRILLING.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
2072809	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2072808	DST Analysis	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
400223078	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400223748	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400223752	PDF-DUAL INDUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400223753	PDF-MICROLOG	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400223754	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400223757	PDF-SONIC	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	REC LOGS DOC#2445168-71, IN SCANNING	11/21/2011 7:33:18 AM
Permit	REC INFO, ATTACHED NEW FORMS, DELETED CORRUPT OTHERS. WAITING ON LOGS	11/16/2011 1:58:12 PM
Permit	aiting on logs, dst#4 and cement tkt are corrupt and cannot be opened, req new copies.	11/16/2011 9:04:35 AM

Total: 3 comment(s)