

FORM 5  
Rev 09/14

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:  
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Date Received:

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

OGCC Operator Number: 82470 Contact Name: Ty Lunn  
Name of Operator: STELBAR OIL CORP INC Phone: (316) 440-7611  
Address: 1625 N WATERFRONT PKWY #200 Fax: (316) 264-0592  
City: WICHITA State: KS Zip: 67206-

API Number 05-121-09802-00 County: WASHINGTON  
Well Name: PRICE Well Number: 1-12  
Location: QtrQtr: NESE Section: 12 Township: 2S Range: 49W Meridian: 6  
Footage at surface: Distance: 1370 feet Direction: FSL Distance: 1230 feet Direction: FEL  
As Drilled Latitude: As Drilled Longitude:

GPS Data:  
Date of Measurement: PDOP Reading: GPS Instrument Operator's Name:

\*\* If directional footage at Top of Prod. Zone Dist.: 1370 feet. Direction: FSL Dist.: 1230 feet. Direction: FEL  
Sec: 12 Twp: 2S Rng: 49W  
\*\* If directional footage at Bottom Hole Dist.: 1370 feet. Direction: FSL Dist.: 1230 feet. Direction: FEL  
Sec: 12 Twp: 2S Rng: 49W

Field Name: PRICE RANCH Field Number: 70610  
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/24/1982 Date TD: Date Casing Set or D&A:  
Rig Release Date: 07/30/2015 Per Rule 308A.b.

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

Total Depth MD 2926 TVD\*\* 2926 Plug Back Total Depth MD 2882 TVD\*\* 2926

Elevations GR 4332 KB 4339 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

CASING, LINER AND CEMENT

| 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          | 24    | 0             | 272           | 200       | 0       | 272     |        |
| 1ST         | 7+7/8        | 4+1/2          | 10.5  | 0             | 2,923         | 150       |         |         |        |

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 07/28/2015

| Method used | String | Cementing tool setting/perf depth | Cement volume | Cement top | Cement bottom |
|-------------|--------|-----------------------------------|---------------|------------|---------------|
| PERF & PUMP | 1ST    | 740                               | 295           | 0          | 750           |

Details of work:

7/27/2015 RU welder and weld on Bell Nipple. RU pump. Pressure test csg to 500 psi. HELD. RIH w/ wireline and perf @ 740', 4 spf w/ csg gun. POOH w/ wireline and RD. SWIFN

7/28/2015 MIRU Basic Cement Services. Established circulation w/ 2% KCL, 2.5 Bpm, 400 psi. Pumped 295 sx 60/40 Pozmix cmt w/ 2% CC. Max Pressure = 300 psi. Avg Pressure = 100 psi. Avg rate = 2.5 bpm, Max rate = 4.0 bpm, ISIP = 500 psi. Cmt did circulate to surface. Pressure up on squeeze. HELD. Clean lines. RD Basic Cementers. SWIFN

7/29/2015 RIH with 3-3/4" bit, bit subs, 4 DCs, and 15.13 jts tbg. Tag top of cement @ 592' KB. RU pump and power swivel. Drill out cmt squeeze. Fell through bottom of cement @ 824' KB (22.5 jts). Pressure test to 500 psi. HELD. RD pump and power swivel. POOH with 22.5 jts tbg 4 DCs, bit, bit subs. RU Pioneer & run CBL-GR-CCL from 1000' KB to surface. Good bond on the squeeze. RD Pioneer. RIH with retrieving head, SN and 80 jts tbg. SWIFN.

7/30/2015 RIH with 6 jts tbg. Circulate sand off RBP. RU tbg swab. Swab well down to 2300' FS. RD tbg swab. Retrieve RBP, POOH and lay down work string 86 jts tbg, SN, retrieve head, RBP. RIH w/ SN, 85 old 2-3/8" jts tbg, 2 new 2-3/8" jts tbg. (87 total jts.). Landed tbg @ 2798' KB. RU tbg swab. Swab well to SN. RD tbg swab. Plumb in wellhead. RDMO Excell rig. Place well on production on 7/31/15 @ 7:00am. Will move to State Komatz #1-36 on 8/10/15.

### FORMATION LOG INTERVALS AND TEST ZONES

| FORMATION NAME | Measured Depth |        | Check if applies |       | COMMENTS (All DST and Core Analysis must be submitted to COGCC) |
|----------------|----------------|--------|------------------|-------|---|
|                | Top            | Bottom | DST              | Cored |   |
|                |                |        |                  |       |   |

Comment:

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

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

Print Name: Ty Lunn

Title: Engineer

Date: \_\_\_\_\_

Email: tlunn@stelbar.com

### Attachment Check List

| Att Doc Num                 | Document Name         | attached ?                              |  |
|-----------------------------|-----------------------|---|--|
| <b>Attachment Checklist</b> |                       |   |  |
| 400880597                   | 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"/> |
|                             | DST Analysis          | Yes <input type="checkbox"/>            | No <input checked="" 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>    |                       |   |  |
| 400880595                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 400880596                   | WELLBORE DIAGRAM      | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |

### General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|----------------|---------------------|
|                   |                |                     |

Total: 0 comment(s)