

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1048628

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from Feast / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
-	
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used?
OG GSW Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Chloride content: ppm Fluid volume: bbls
	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec TwpS. R East West
GSW Permit #:	County: Permit #:
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date	

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				
Letter of Confidentiality Received				
Date:				
Confidential Release Date:				
Wireline Log Received				
Geologist Report Received				
UIC Distribution				
ALT I II III Approved by: Date:				

	Side Two	
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	

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 (Attach Additional She	eets)	Yes No		-	n (Top), Depth and		Sample
Samples Sent to Geolog	ical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	<pre> Yes □ No Yes □ No Yes □ No</pre>					
List All E. Logs Run:							
		CASING		ew Used			
		Report all strings set-	conductor, surface, inte	ermediate, producti	on, 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: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot		PERFORATION Specify Fo		RD - Bridge P Each Interval F		e			ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At:		Packe	r At:	Liner R	un:	No	
Date of First, Resumed F	Product	ion, SWD or ENH	<i>₹</i> .	Producing M	ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
			I			1				
DISPOSITIO	N OF C	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION INTE	RVAL:
Vented Sold		Jsed on Lease		Open Hole	Perf.	Uually (Submit)	, Comp. 4 <i>CO-5)</i>	Commingled (Submit ACO-4)		
(If vented, Subr	nit ACC	-18.)		Other (Specify)						

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

CONSOLIDATED Oil Well Services, LLC	REMIT TO Consolidated Oil Well Servi Dept. 970 P.O. Box 4346 Houston, TX 77210-4	346	P Chanute 620/431-9210 • 1-80	Main Office O. Box 884 a, KS 66720 10/467-8676 20/431-0012 236955 =========
***************************************	:=====================================		Pa	ge 1
MICHAEL DRILLING BOX 402 IOLA KS 66749 () -	V-LAT 29137 09-30	TA R-1 -10		
>		==========	=======================================	
PREMIUM	ion Z CEMENT MIX GEL / BENTONITE GEL / BENTONITE	Qty 145.00 250.00 200.00		Total 1426.80 50.00 40.00
Description 441 MIN. BULK DELIVERY 463 CEMENT PUMP 463 EQUIPMENT MILEAGE (ONE	WAY)	Hours 1.00 1.00 50.00	925.00	Total 315.00 925.00 182.50
. 18 <u>6</u>				
		=======================================	======================================	======================================
Parts:1516.80 Freight:Labor:.00 Misc:Sublt:.00 Supplies	.00 Tax: .00 Total: : .00 Change:	3050		
			Data	
signed			Date	Wegi AND WY
BARTLESVILLE, OK ELDORADO, KS EUREKA, Ks 918/338-0808 316/322-7022 620/583-766	GILLETTE, WY MCALESTER, O 4 307/686-4914 918/426-7667	K Ottawa, Ks 785/242-404	THAYER, KS 44 620/839-5269	Worland, WY 307/347-4577





TICKET NUMBER 29137

LOCATION Euroky FOREMAN Russen meloy

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

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELI	NAME & NUM	IBER	SECTION	TOWNSHIP	RANGE	COUNTY	
9-30-200	5448	V-LA	HA R	-1				Allen	
CUSTOMER									
Michen	Drlg			[TRUCK #	DRIVER	TRUCK #	DRIVER	
MAILING ADDRE	ESS 🗳			SAGETY	463	Rick			
P.O. Bo	x 402			Mooting	44(JOHN JS			
CITY		STATE	ZIP CODE	7 ĭ					
TOLA		Ks	66749						
JOB TYPE	JOB TYPE								
CASING DEPTH	933		· • •	_ TUBIN G <u>SA~</u>	BACK		OTHER		
SLURRY WEIGH	IT 13.8	SLURRY VOL	35 861	WATER gal/si	k <u>s.6</u>	CEMENT LEFT in	CASING_ <u>2</u> 0	•	
DISPLACEMENT	т <u>21³/4</u>	DISPLACEMEN	T PSI	MIX PSI	<u></u>	RATE 4 Br	m		
REMARKS: 54	afaty mee	ting, Rig	upto	SY2 CAS	ing Brenk	Circulation	<u>19 36</u>	WATER.	
Mix 200	A Gel Fl	ush ul 10	BSI WAL	*r. M:X	145 SK: 51	0/50 Pozmix	coment a	+ 13.8 **	
while of 1.26 DiD NOT wash up & Displace up 21314 Bol waster 4 Bol Shirry									
TO Pit. Close CASING IN 100 PSI JOB COMPLETE TEAF DOWN.									
			THANK		•				
		-	INANG						
			\sim	1					
			Russell	1			·		

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE CEMENT Qump	925.00	925.00
5406	<u>So</u> miles	MILEAGE	3.65	182.50
1124	145 5Ks	50/50 Pozmix Coment	9,84	1426.80
<u> 8 8 11 – </u>	250*	Gel = 2% IN COMENT	.20	50.00
UIBE	<u>200 म</u>	Gel CFor Gel Flysh Ahron	.20	40.00
540 Z	<u></u>	Min Ton Milenge	315.00	315.00
570 0		I I I I I I I I I I I I I I I I I I I		5.15.00
			·	
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				2939.30
			SALES TAX	E 110.73
Ravin 3737		236965	ESTIMATED TOTAL	3050.03
AUTHORIZTION 4	NED NOLAND	TITLE 60/0WNer	DATE 9-30	-2010

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.

Michael Drilling, LLC P.O. Box 402 Iola, KS 66749 620-365-2755

Company:	Rick Michael	Date:	09/29/10	
Address:	PO Box 402	Lease:	V Latta	
	Iola Kansas 66749	County	Allen	
Ordered By	Rick Michael	Well#:	<u>R-1</u>	
5		API#:	15-001-30108-00-00	

Drilling Log

FEET	DESCRIPTION	FEET	DESCRIPTION
0-48	Overburden	705-711	Lime
48-64	Shale	711-715	Shale
64-75	Lime	715-719	Oil Sand
75-104	Shale	719-830	Shale
104-148	Lime	830-832	Sand
148-175	Shale	832-852	Oil Sand
175-183	Lime	852	TD
183-235	Shale	f	
235-280	Lime		Surface 48'
280-314	Shale		
314-320	Lime		
320-326	Black Shale		
326-345	Lime		
345-517	Shale		
517-533	Lime		
533-542	Shale		
542-554	Lime		
554-603	Shale		
603-644	Sand		
644-653	Shale		
653-655	Coal		
655-685	Shale		
685-699	Lime		
699-705	Shale		

Iola, Kansas, **Received of** THE NEW KLEIN LUMBER CO., INC. BUILDING MATERIALS 365-2201 Comm 30 D Cn 283.50 23 く N M Suface Casing Coment for Johnson WD-1 Johnson R-4 Johnson R-5 Johnson R-6 V- Latta R-