



KANSAS CORPORATION COMMISSION 1058171
OIL & GAS CONSERVATION DIVISION

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 # _____

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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

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

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total 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

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



1058171

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. 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 <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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> 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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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
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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> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Well Refined Drilling Company, Inc.

4230 Douglas Road - Thayer, KS 66776

Contractor License # 33072 - FEIN # 48-1248553

Office - 620-839-5581; Jeff Pocket - 620-432-6170; Fax - 620-839-5582



Rig #:	2	License # 9313
API #:	15-037-22167-0000	
Operator:	James D. Lorenz	
Address:	543A 22000 Road	
	Cherryvale, KS 67335 - 8515	

S19	T30	R22E
Location:		N2,N2,N2,NW
County		Crawford - KS

				Gas Tests			
Well #:	ws#1	Lease Name:	Amershek II	Depth	Oz.	Orifice	flow - MCF
Location:	5115	FSL		130		No Flow	
	3460	FEL		205		No Flow	
Spud Date:		3/11/2011		230		No Flow	
Date Completed:		3/15/2011	TD: 905	255		No Flow	
Geologist:				280		No Flow	
Driller:		Josiah Kephart		305		No Flow	
Casing Record		Surface	Production	330		No Flow	
Hole Size		12 1/4"	6 3/4"	380		No Flow	
Casing Size		8 5/8"		405		No Flow	
Weight				480		No Flow	
Setting Depth		20' 5"		505		No Flow	
Cement Type		Portland		530		No Flow	
Sacks		4		555		No Flow	
Feet of Casing				580		No Flow	
				630		No Flow	
				680		No Flow	
				730		No Flow	
				755	1	3/8"	3.56

11LC-031511-R2-004-Amershek II - WSW # 1 - James D. Lorenz

Well Log

Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	1	overburden	119	206	shale	270	303	shale
1	6	lime	206	207	lime	303	306	sand
6	7	blk shale	207	211	shale	306	317	shale
7	59	shale	211	212	coal	317	319	blk shale
59	61	sand	212	223	shale	319	320.5	coal
61	66	shale	223	224.5	lime	320.5	331	shale
66	67.5	coal	224.5	225	coal	331	358	lime
67.5	78	shale	225	227	blk shale	358	359	blk shale
78	95	lime	227	234	shale	359	360	coal
95	96.5	shale	234	235	coal	360	398	shale
96.5	97.5	blk shale	235	238	shale	398	399	coal
97.5	100	shale	238	245	blk shale	399	466	shale
100	101	coal	245	248	coal	466	470	sand
101	103.5	shale	248	267	shale	470	475	shale
103.5	115	lime	267	268	lime	475	476	coal
115	116	shale	268	268.5	blk shale	476	482	shale
116	118.5	blk shale	268.5	269	shale	482	483	coal
118.5	119	coal	269	270	lime	483	508	shale

