

Kansas Corporation Commission Oil & Gas Conservation Division

1059829

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:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City:	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
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 Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	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: sx cmt
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 Conv. to GSW	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 #:	Lease Name: License #:
SWD Permit #:	Quarter Sec Twp S. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date 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 Approved by: Date:

Side Two



Operator Name:			Lease Name	e:		_ Well #:	
Sec Twp	S. R	East West	County:				
ime tool open and clo	sed, flowing and shut s if gas to surface tes	I base of formations pe -in pressures, whether st, along with final chart well site report.	shut-in pressure	reached static level	, hydrostatic press	sures, bottom h	ole temperature, fluid
Orill Stem Tests Taken (Attach Additional S	heets)	Yes No		Log Formatio	on (Top), Depth ar	nd Datum	Sample
Samples Sent to Geolo	ogical Survey	Yes No	N	lame		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	Electronically	Yes No Yes No Yes No					
ist All E. Logs Run:							
			RECORD	New Used intermediate, product	ion, 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
		ADDITIONA	L CEMENTING / S	SQUEEZE RECORD			
Purpose: — Perforate — Protect Casing — Plug Back TD — Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used		Type and F	Percent Additives	
Shots Per Foot	PERFORATION Specify F	ON RECORD - Bridge Plu ootage of Each Interval Pe	gs Set/Type rforated		acture, Shot, Cemen mount and Kind of Ma		d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed I	Production, SWD or EN	HR. Producing Me	thod:	Gas Lift (Other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water B	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITIO	ON OF GAS: Used on Lease mit ACO-18.)	Open Hole		ually Comp. Co	mmingled omit ACO-4)	PRODUCTIO	ON INTERVAL:

JTC Oil, Inc.

Orillers Log

Well Name Carter A BSP CA7	
API# 15-059-25569-00-00	Cement Amounts
Surface Date 5/28/11 20 ft 6.5	3 Sacks
Cement Date 6/10/11	·
Well Depth 700	

Casing Depth 665

Drillers	Log

<u>Formation</u>	<u>Depth</u>	Fromation	<u>Depth</u>
Soil	0		
lime	8		
shale	23		
lime	108		
shale	128		
lime	149		
red bed	153		
shale	159		
lime	198		
shale	216		
lime	222		
coal	250		
shale	256		
lime	258		
lime shale	334		
shale	338		
lime	444		
red bed	445		
shale	451		
lime	462		
shale	474		
lime	528		
shale	536		
lime	545		
shale	548		
lime shale	558		
shale	567		
top oil sand	593-596 mi	x/shale/sand	
	596-598 ve		
	598-602 ve	- 1. - 1 1 1 1 1 1 1 1.	
	602-606 ve	ry good	

arter A BSP CAT

606-610 shale stop oil sand 607

608 shale #2 oil sand 667-669

669-672 not oil

stop drilling 700

casing pipe 665



	nanute, KS 667: or 800-467-8676		D HCKE	CEMEN		KEP	JRI	648	" .At a.
DATE	CUSTOMER#		NAME & NUME		SECT	ION	TOWNSHIP	RANGE	COUNTY
6/10/11	2579	Courton 6	7. BSP-	7	NW	17	18	ચા	FR
CUSTOMER	~	Λ							
Ev	ceri =	Resource	e5]	TRUC	CK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	SS			,	50	Q	Fred	Sortete	uta
1097	5 Grand	lui em Dr			4	75	Cosen	CIL	1
CITY .		STATE	ZIP CODE]	3	סל	Arles	ARM	
Overby	nd Park	KS	66210			48	Tild	-12	
JOB TYPE LC		HOLE SIZE	6'	HOLE DEPTH	SUPERIOR STATE		CASING SIZE & W	EIGHT 27	EUE
CASING DEPTH	695 d	DRILL PIPE		TUBING			The second secon	OTHER	
SLURRY WEIGH	ΙΤ	SLURRY VOL_		WATER gal/s	k		CEMENT LEFT In	CASING 25	1P/VS
DISPLACEMENT	4.04	DISPLACEMENT	r PSI	MIX PSI			RATE Y BPY		0
REMARKS:	leck ras	me denti	~ w/ w	! re line	. M:	x + P	ump 200	# SE Gul	
Flu.	sh.	o.mix x	Puma	100 KSK	5 71	/30	Pos Mix	Coment	
2%	Jel 5%5	alt 12# 1	heno S	00/9K.	Ca	Ynen		face	
	ch pum		s clean		place		1/2 " Rubb.		-n
107	ma TD		4 BBCS	-	water		ressure		1051
01		essove	to sex	float	Valu		Shut in		
	/						,	8	
							7		
	C DV:111	re					Find M	adu	
		8	,						
ACCOUNT CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICE	S or PRO	DDUCT	UNIT PRICE	TOTAL
5401			PUMP CHARG	E			:	v.	97500
5406		0	MILEAGE	Truck		se			NK
3402		5 95	Casina	Locata	ge_				NC
5407	1/2 mini		Ton	miles '	/				16500

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	10	97500
5406	٥	MILEAGE Truck on Lease		NC
3402	695	Cosing footage		NC
5407	12 Minimon	Ton Miles		16500
55020	2hrs	80 BBL Vac Truck		18000
1129	/00 SKS	70/30 Por Mix Cement		121000
1118B	376 ^H	Promium Gol		2536
1111	203#	Granulated Salt		7105
1107A	S0#	Pheno Scal		6100
4402	/	2/2" Rubber flug		2800
		WO# 242057		
		7.8%	SALES TAX	112,2
vin 3737	71 0	7.570	ESTIMATED TOTAL	3877

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. Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner

July 19, 2011

Marcia Littell Enerjex Kansas, Inc. 27 CORPORATE WOODS, STE 350 10975 GRANDVIEW DR OVERLAND PARK, KS 66210

Re: ACO1 API 15-0

API 15-059-25569-00-00 Carter A BSP-CA7 NW/4 Sec.17-18S-21E Franklin County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully, Marcia Littell