



KANSAS CORPORATION COMMISSION 1061912
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: _____



1061912

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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DRILLERS LOG

DRILLING CONTRACTOR:
THREE RIVERS EXPLORATION LLC
#33217

Ron-Bob Oil LLC

API NO: 15-207-27811-00-00
FREEMAN #3
SEC. 19, T23S, R16E
WOODSON CO. KS

SOIL & CLAY 0-25
SHALE 25-38
LIME 38-42
SHALE 42-48
LIME 48-52
SHALE 52-234
LIME 234-262
SHALE 262-264
LIME 264-282
SHALE 282-292
LIME 282-335
SHALE 335-342
LIME 342-510
SHALE 510-512
LIME 512-517
SHALE 517-522
LIME 522-530
SHALE 530-534
LIME 534-538
SHALE 538-546
LIME 546-550
SHALE 550-558
LIME 558-621
SHALE 621-630
LIME 630-652
BLACK SHALE 652-654
LIME 654-682
SHALE 682-730
LIME 730-740
SHALE 740-838
LIME 838-846
SHALE 846-851
LIME 851-854
SHALE 854-860
LIME 860-871
SHALE 871-874
LIME 874-892
SHALE 892-934
LIME 934-946
SHALE 946-960
LIME 960-964
SHALE 964-968
LIME 968-984
SHALE 984-996
LIME 996-1002
SHALE 1002-1012
LIME 1012-1028
SHALE 1028-1104

4-18-11 DRILLED 10" HOLE AND SET 42 '
8 5/8" SURFACE CASING.
4-18-11 CONSOLIDATED CEMENTED SURFACE CASING
WITH 35 SACKS OF CLASS A CEMENT
4-20-11 STARTED DRILLING 7 7/8" HOLE,
4-23-11 FINISHED DRILLING T.D 1527'

LIME 1104-1112
SHALE 1112-1115
LIME 1115-1118
SHALE 1118-1122
LIME 1122-1140
SHALE 1140-1160
LIME 1160-1164
SHALE 1164-1168
LIME 1168-1174
SHALE 1174-1200
SHALE 1200-1300
SHALE 1300-1408
LIME 1408-1527

Mississippi

T.D. 1527



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30492

LOCATION Eureka

FOREMAN Rick Ledford

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

FIELD TICKET & TREATMENT REPORT

Shannon Feck

CEMENT

API # 15-207-27811-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-23-11	6982	Freeman #3	19	23	16E	Wagon
CUSTOMER <u>Ron-Bob Oil LLC</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>P.O. Box 41</u>			445	Dave		
CITY <u>Neosho Falls</u>			543 L	Alta B		
STATE <u>Ks</u>			479 T	Ed		
ZIP CODE <u>666758</u>			437	Shannon		

JOB TYPE logstring 0 HOLE SIZE 7 1/2" HOLE DEPTH 1527' CASING SIZE & WEIGHT 4 1/2" 10.5"
 CASING DEPTH 1411.5 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.8"-13.4" SLURRY VOL 71 Bbl WATER gal/sk 80-90 CEMENT LEFT in CASING 0'
 DISPLACEMENT 22.6 Bbl DISPLACEMENT PSI 700 MAX PSI 1100 Bump plug RATE _____

REMARKS: Safety meeting- Rig up to 4 1/2" casing. Set packer shoe @ 1200 PSI. Pump 5 Bbl water ahead. Mixed 210 sks 60/40 Pozmix cement w/ 6% gel + 1/2" phenosol/sk @ 12.8"/gal. Tail in w/ 50 sks OWC cement w/ 5" Rot-seal + 1/2" phenosol/sk @ 13.4"/gal. Washout pump + lines, shut down, release rubber plug. Displace w/ 22.6 Bbl fresh water. Final pump pressure 700 PSI. Bump plug to 1100 PSI. wait 2 minutes, release pressure, float + plug held. Good cement returns to surface = 6 Bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	40	MILEAGE	4.00	160.00
1131	210 sks	60/40 Pozmix cement	11.95	2509.50
1188	1080*	6% gel	.20	216.00
1107A	105*	1/2" phenosol/sk	1.22	128.10
1126	50*sk	OWC cement	17.90	895.00
1110A	250*	5" Rot-seal/sk	.44	110.00
1107A	25*	1/2" phenosol/sk	1.22	30.50
5407A	11.63	tan mileage bulk tire	1.26	586.16
5502C	4 hrs	80 Bbl VAC. TRX	90.00	360.00
1123	3000 gals	city water	15.60/1000	46.80
4404	1	4 1/2" top rubber plug	42.00	42.00
4306	1	thread lock kit	25.00	25.00
4250	1	4 1/2" Type A packer shoe	1552.00	1552.00
4129	2	4 1/2" centralizers	42.00	84.00
4003	2	4 1/2" baskets	218.00	436.00
			Subtotal	8156.06
			SALES TAX	443.47
			ESTIMATED TOTAL	8599.55

Ravin 3737

304928

AUTHORIZATION Rick Ledford

TITLE _____

DATE _____

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.