

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1062825

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 Cast / 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:
	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? Yes No
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:	Drilling Fluid Monogoment Plan
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
Conv. to GSW	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec Twp S. 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
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 Shi	eets)	Yes	No		og Formation	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolog	,	Yes	No	Name	e		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted B (If no, Submit Copy)	Electronically	☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐] No] No] No					
List All E. Logs Run:								
			CASING R			on oto		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.	g	nductor, surface, inte 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 REC Specify Footage						e	,	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth			
TUBING RECORD: Size: Set			Set At:	Set At: Packer At: Liner Run:							
Date of First, Resumed Production, SWD or ENHR.				Producing M	lethod:	ping	Gas Lift	Other (Explain)			
Estimated Production Oil Bbls. Per 24 Hours		ls.	Gas Mcf W		Wate	ər	Bbls.	Gas-Oil Ratio	Gravity		
DISPOSITION OF GAS:				METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:		
Vented Sold Used on Lease				Open Hole	Perf.	Dually (Submit /	Comp. AC <i>O-5)</i>	Commingled (Submit ACO-4)			
(If vented, Su	bmit ACC	-18.)		Other (Specify)							

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

			Alo	th									
ſ	Lease	e:		AKER							Well #: I-6 5E .SW		
ł	Owne	er:			IELD SERVICES, INC.					-	Location: \$2,\$W,NE, \$:5, T:20, S.R.:23,		
			-	2005				roduct		January C. M.	E E E E E E E E E E E E E E E E E E E		
				H			Box 266, I	Mound	d City, k	(s	66056	County: LINN	
					N PRODUCTION CO.	Cell	# 620-	363-26	83				
	OPR	#:	433	89		Office	e # 91 3	8-795-2	99	91	1000		
Ĩ	Surfa	ce:	Cem	ented:	Hole Size:						FEL: 3630 3624		
	20FT,	, 6IN	5 SA	CKS	8 3/4						API#: 15-107-24409		
	Longs			ented:	Hole Size:						Started: 8-5-11		
	291 2	2 7/8		50	5 5/8						Completed: 8-8-11		
						SN: NO	ONE	Pa	acl	ker:	TD: 300		
			1	Nell Lo	og	Plugged:		B	oti	tom Plug:			
-									_				
TI		TM epth		Formation			TKN	BTM		Formation			
1	1			TOP SOIL			CLIDE	Depth	11				
1	2			CLAY			-	ME: 3:30					
- 21			-	LIME				D: 12:30					
2	2			SHALE			1						
2	2			BLACK SHA	LE					1' 2 7/8, 8RD PIPE, TD:30	0		
2	2		-+	LIME				ME: 3:30 D: 2:30P		A, 8-8-11			
5							D. 2.50P	101-	DECKI				
5	3		\rightarrow	LIME		-	1						
1	4			BLACK SHA	LE		1						
8	4		-	SHALE (LIM					Т				
14		99		SHALE					+				
1		95	-+	BLACK SHA	IF				+		The second s		
5		00	-+	SHALE					+				
7		07		LIME				+					
21		28		SHALE		a constanting			+				
10		38		LIME					+				
5.		42.5		SHALE (LIM	EY)				+				
2.		45			SHALEY) (GOOD BLEED)				+		and the second		
21		66	-		SOME SHALE) (GOOD BLE	FD)			+				
6		72			SHALEY) (FAIR BLEED)				+				
1		73	-	SANDY SHA					+				
15		88		SHALE					+				
2		90	-	COAL					+				
3		93		SHALE					+				
TE		00		LIME	i i i i i i i i i i i i i i i i i i i				+				
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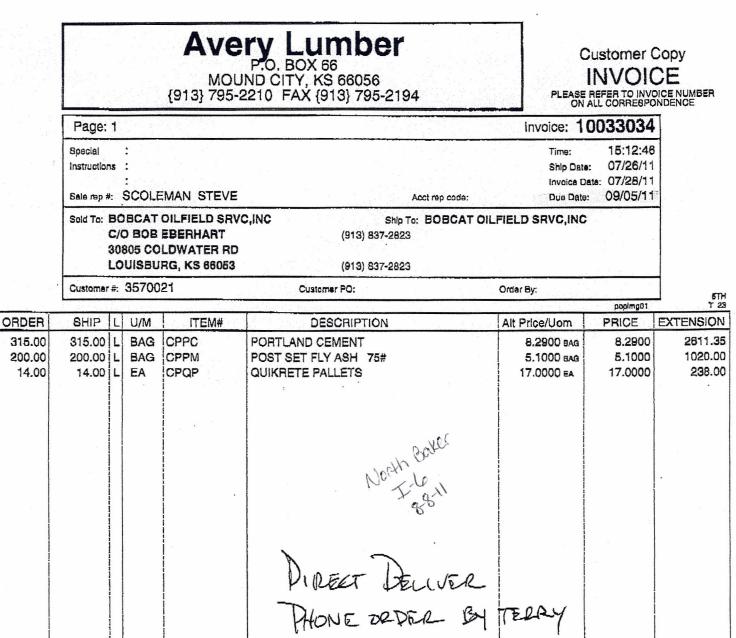
Dale Jackson Production Co. Box 266, Mound City, Ks 66056 Cell # 620-363-2683 Office # 913-795-2991

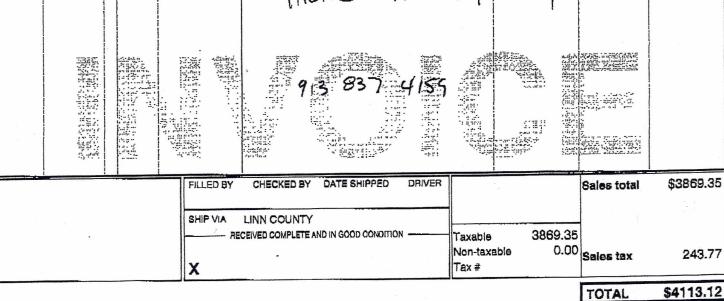
Core	Run	#1

Well #: I-6 50
Location: \$2,SW,NE, S:5, T:20,
S.R.:23, E
County: LINN
FSL: 1330 1322
FEL: -3630 3624
API#: 15-107-24409
Started: 8-5-11
Completed: 8-8-11

	North
Lease :	S. BAKER
Owner:	BOBCAT OILFIELD SERVICES INC.
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	241				
1	242		2		
				SHALE (LIMEY)	242.5
2	243		2		
3	244		1.5		
4	245		1	OIL SAND (SHALEY) (GOOD BLEED)	245
5	246		0.5		
6	247		1		
7	248		1	OIL SAND (SOME SHALE) (GOOD BLEED)	
8	249		1		
9	250		1		
10	251		1.5		
11	252		1.5		
12	253		1		
		1			
13	254		1		
14	255		1		
15	256		2		
16	257		1.5		
17	258		2.5		
18	259		2		
19	260		2.5		51X
19					
20	261		1.5		





2 - Customer Copy