

#### Kansas Corporation Commission Oil & Gas Conservation Division

#### 1063033

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: State: Zip:+	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
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  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 TwpS. R
☐ ENHR         Permit #:           ☐ GSW         Permit #:	County: Permit #:
Spud Date or 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 III Approved by: Date:						

Side Two



Operator Name:			Lease Name: _			Well #:	
Sec Twp	S. R	East West	County:				
time tool open and clo	osed, flowing and shu es if gas to surface te	d base of formations pen t-in pressures, whether s st, along with final chart(s well site report.	hut-in pressure read	ched static level,	hydrostatic press	ures, bottom h	ole temperature, fluid
Drill Stem Tests Taker (Attach Additional		Yes No		og Formation	n (Top), Depth an	d Datum	Sample
Samples Sent to Geo	logical Survey	☐ Yes ☐ No	Nam	е		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Copy	d Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
		Report all strings set-		ermediate, producti		T 2 .	
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 / SQL	JEEZE RECORD	I		
D. d		Type of Cement	# Sacks Used		Type and P	ercent Additives	
Plug Off Zone							
Shots Per Foot		DN RECORD - Bridge Plug Footage of Each Interval Perf			cture, Shot, Cement mount and Kind of Ma		d Depth
	<u> </u>						
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	HR. Producing Meth		Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil I	Bbls. Gas	Mcf Wat	er Bl	ols. G	Sas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:	N	METHOD OF COMPLE	ETION:		PRODUCTIO	ON INTERVAL:
Vented Solo	Used on Lease	Open Hole	Perf. Dually		nmingled mit ACO-4)		
(If vented, Su	bmit ACO-18.)	Other (Specify)	(Odbillit)	, (Gubi			

## KIM B. SHOEMAKER

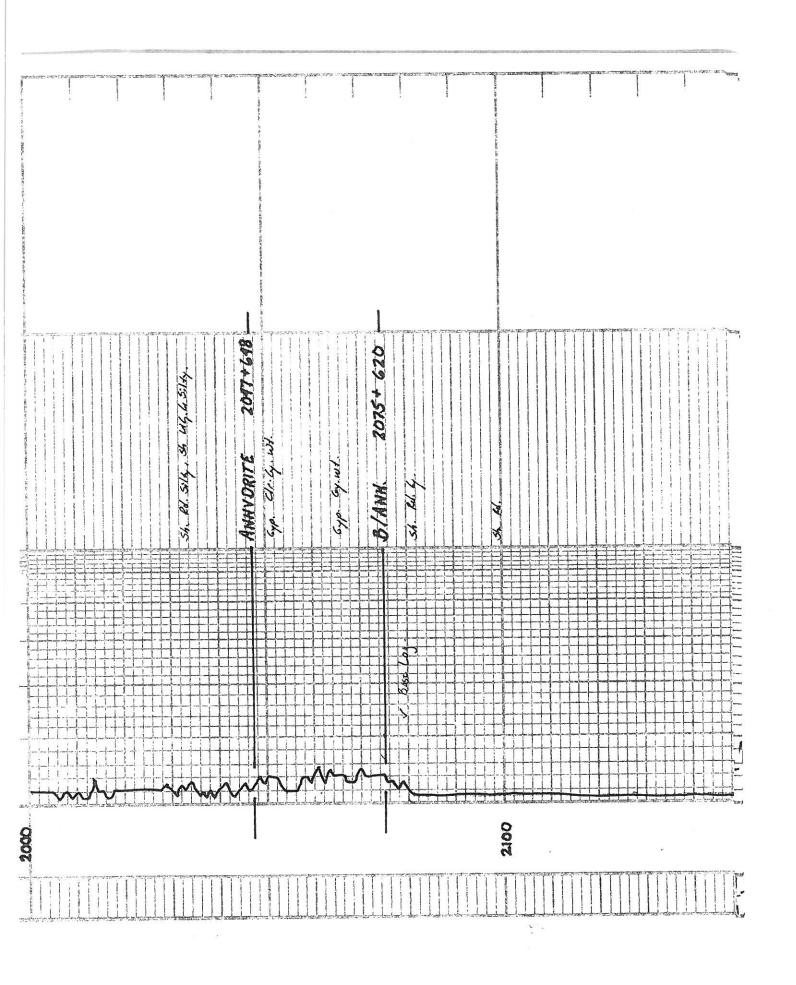
CONSULTING GEOLOGIST 316-684-9769 \* WICHITA,KS

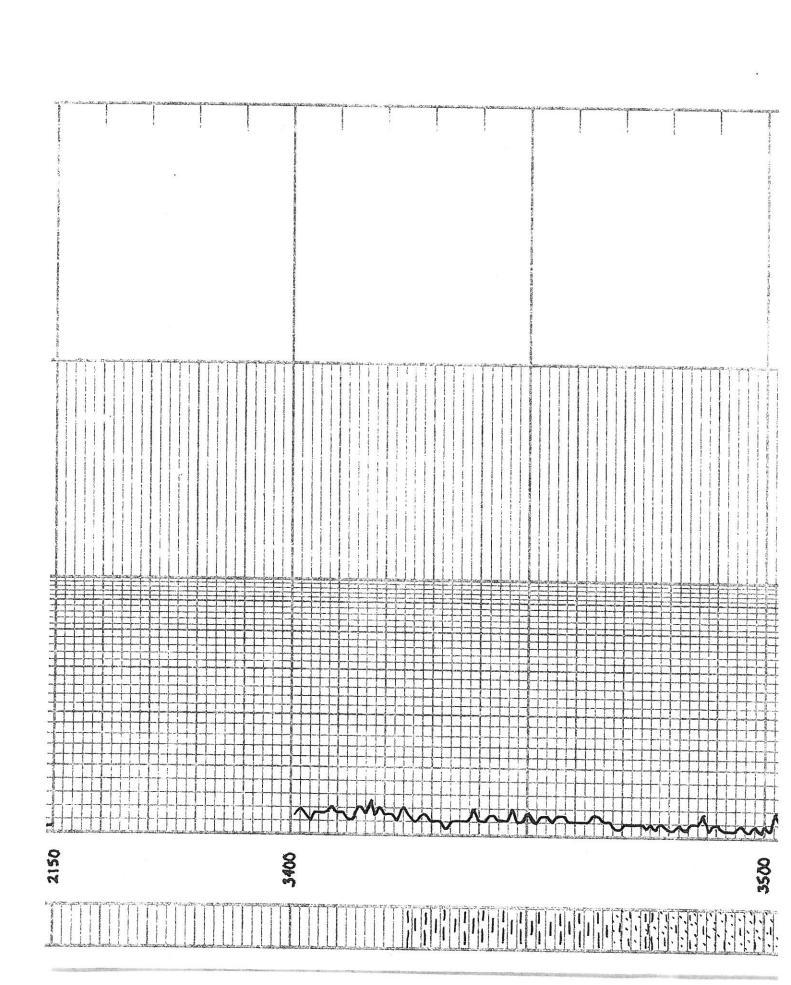
## GEOLOGIST'S REPORT

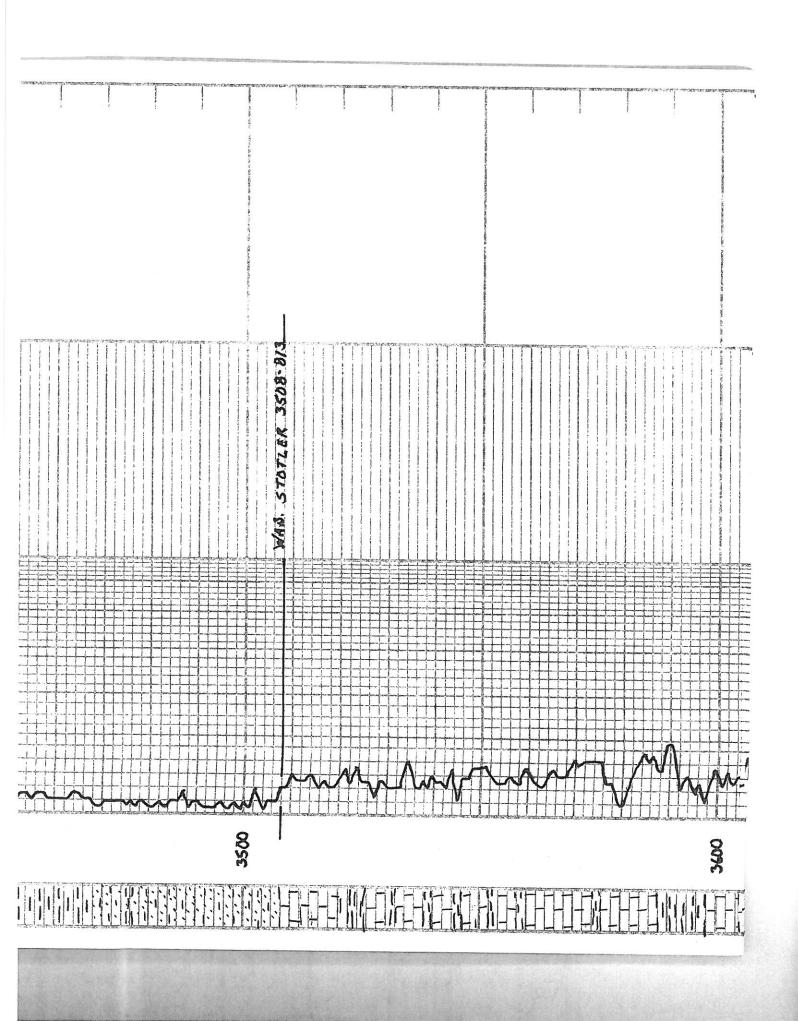
DRILLING TIME AND SAMPLE LOG

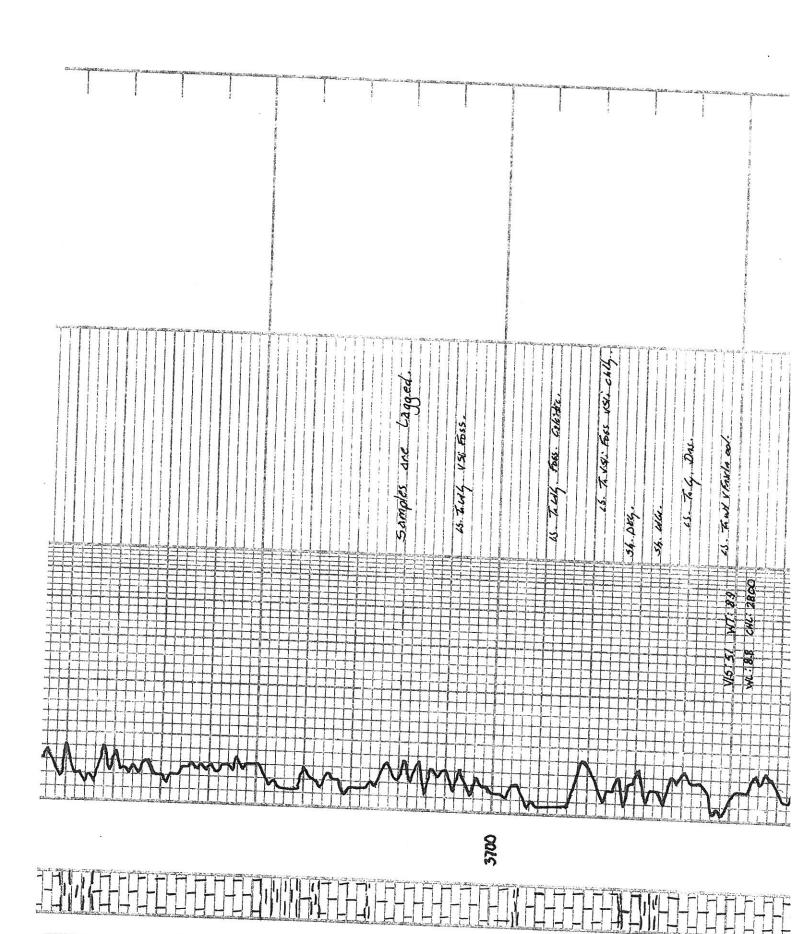
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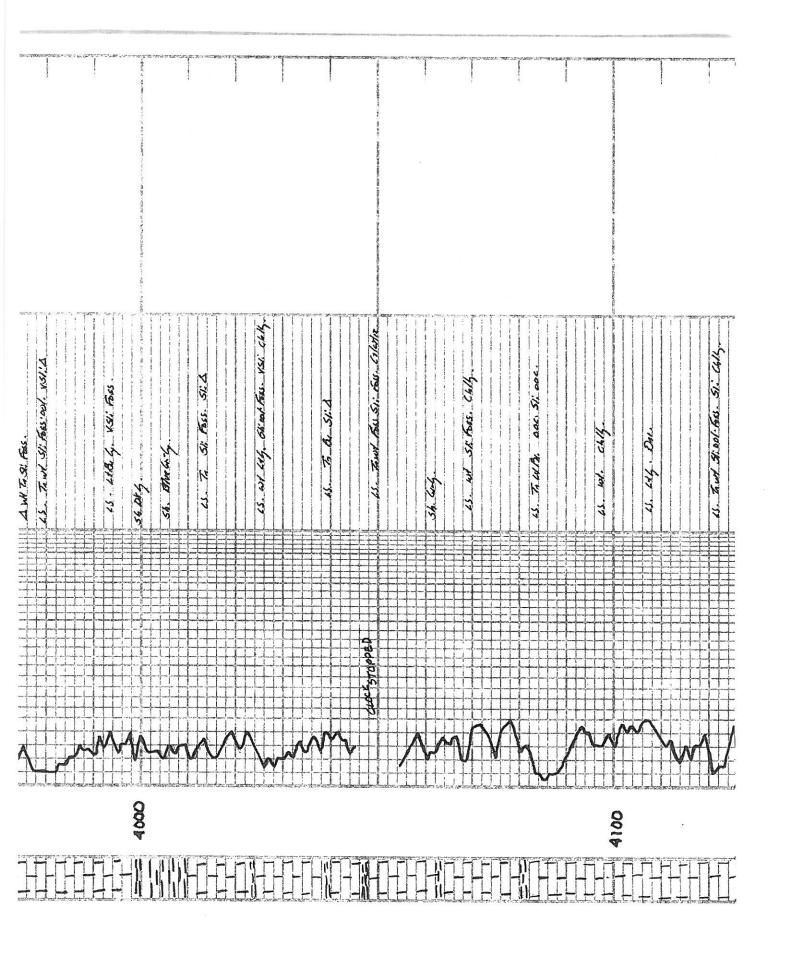


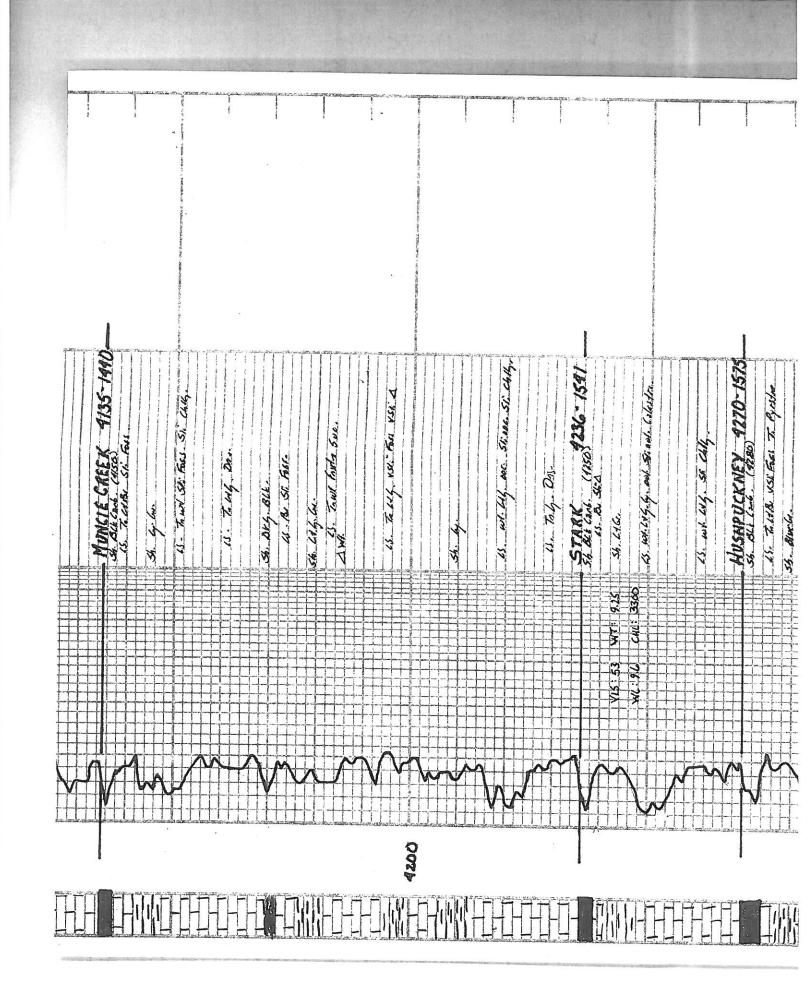


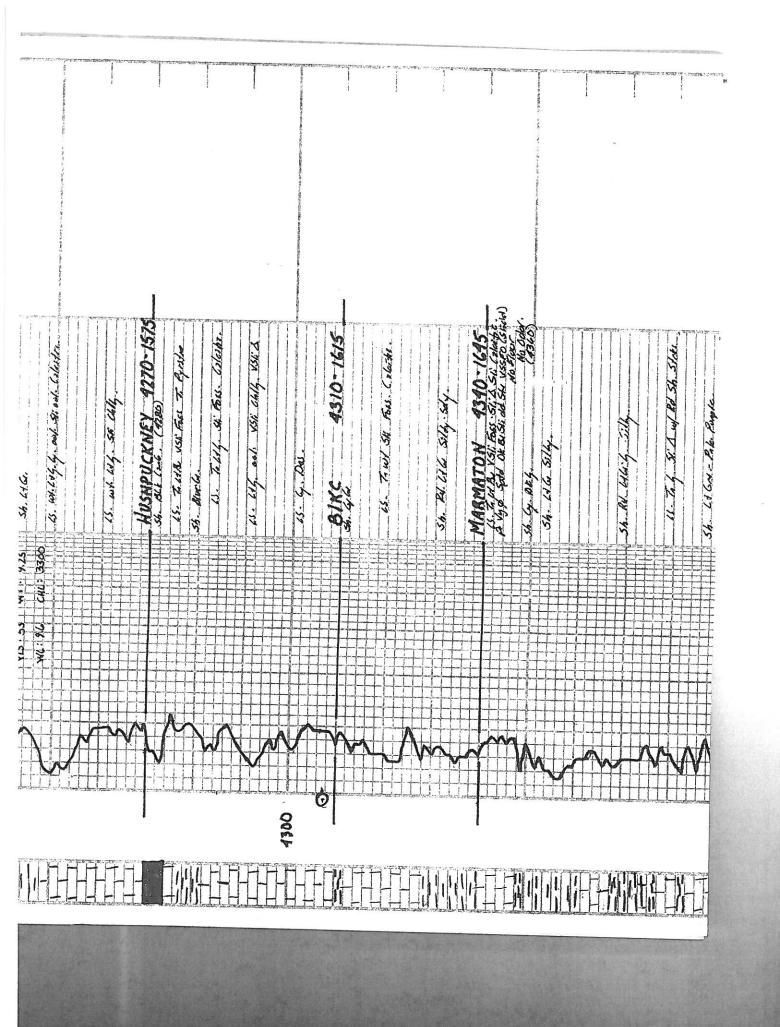


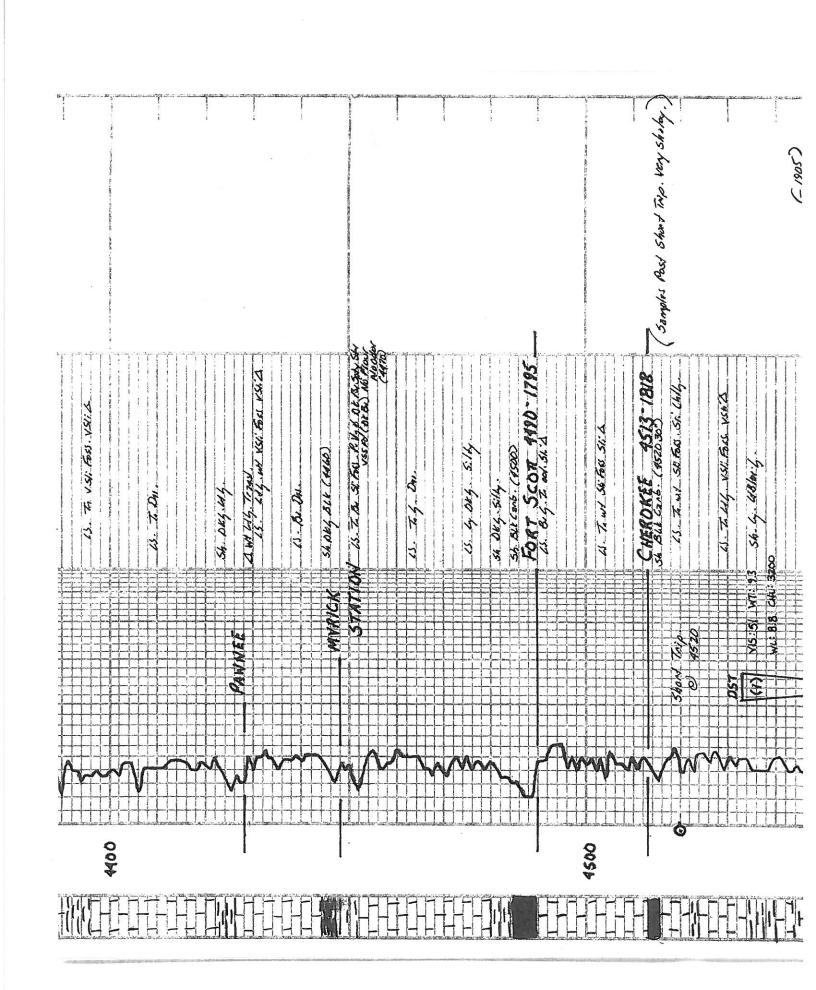
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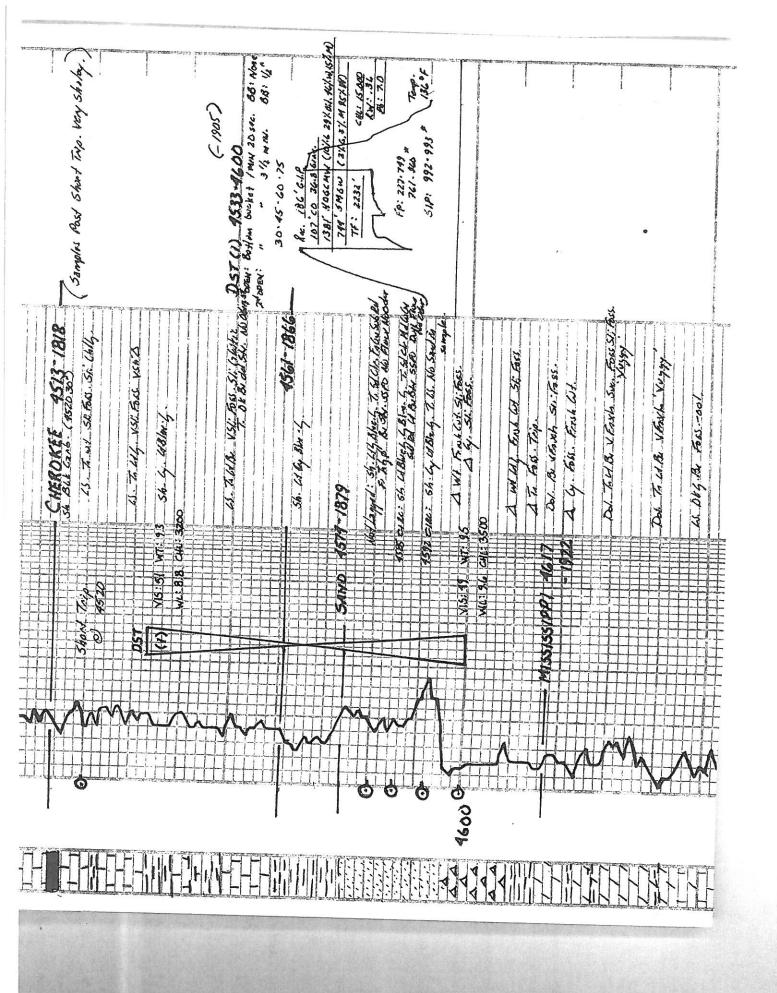
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DATE	CUSTOMER #	WELL	NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
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CUSTOMER Payr	nord o	. \		76-	TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	ESS			15-	399	Kelly G.		
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CASING DEPTH	258'	DRILL PIPE		_TUBING			OTHER	
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TITLE TOOKS

TOTAL.

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 for



TICKET NUMBER 28027

LOCATION Oakley Ks

FOREMAN Walt Dinkel

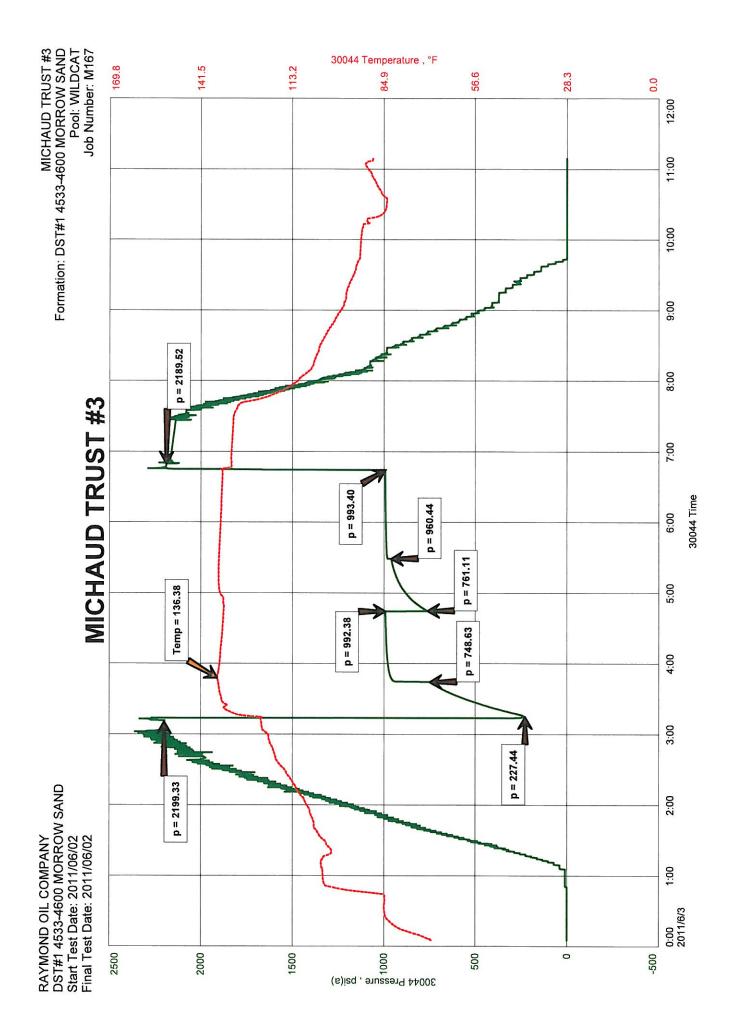
PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

### FIELD TICKET & TREATMENT REPORT

Kelly Gable

620-431-9210	or 800-467-8676	j		CEMEN	T		•	
DATE	CUSTOMER#	WEL	L NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
6-4-11	7158	Mich	and Tro	st #3	21	185	27W	Lano
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CITY		STATE	ZIP CODE	1	528-7727 4.39		Per-Cha	Smith
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		DRILL PIPE					OTHER DY	·
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DISPLACEMENT	T_115 BBC	DISPLACEMEN	T PSI_1000	MIX PSI		RATE 6	8PM	
REMARKS:	Safety Me	eting, Ri	gupan	Duko#4	run Flori	+ Zeumme	at Cout	ou#1-3-7
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ACCOUNT						<del> </del>	Crew	
CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES or PRO	DDUCT	UNIT PRICE	TOTAL
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Fast



# DIAMOND **TESTING**

#### **Pressure Survey Report**

MIKE COCHRAN

#### **General Information**

**Company Name** Well Name Unique Well ID Surface Location Field Well Type

**RAYMOND OIL COMPANY Job Number** MICHAUD TRUST #3 Representative DST#1 4533-4600 MORROW SAND Well Operator RAYMOND OIL COMPANY SEC.21-18S-27W LANE CO. KS. Report Date **WILDCAT Prepared By** 

2011/06/02 **MIKE COCHRAN** Vertical Qualified By KIM SHOEMAKER **Test Unit** NO. 1

#### **Test Information**

**Test Type** CONVENTIONAL **DST#1 4533-4600 MORROW SAND** Formation Test Purpose (AEUB) **Initial Test** 

2011/06/02 Start Test Time **Start Test Date** 00:05:00 **Final Test Date** 2011/06/02 Final Test Time 11:10:00 Well Fluid Type 01 Oil

Gauge Name Gauge Serial Number 30044

#### **Test Results**

#### Remarks

**RECOVERED:** 

186' G.I.P. 107' CO 100% OIL

1381' GHOCMW 10% GAS, 29% OIL, 46% WTR, 15% MUD 744 GMW 2% GAS, 95% WTR, 3% MUD W/ SCUM OF OIL 2232 TOTAL FLUID

CHLOR: 15,000 PPM

PH: 7.0

RW: .36 @ 84 DEG

GRAVITY: 36.8@60 DEG

TOOL SAMPLE: 1% OIL, 97% WTR, 2% MUD

#### **DIAMOND TESTING**

P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313

### DRILL-STEM TEST TICKET

FILE: MCHDTRST3DST1

TIME ON: 0005

Company RAYMOND OIL COMPANY Lease & Well No. MICHAUD TRUST #3 Contractor DUKE RIG 4 Charge to RAYMOND OIL COMPANY MORROW SAND Effective Pay\_ 2695 KB M167 Elevation Formation Ft. Ticket No. Date 06/03/2011 Sec. 21 Twp. 18 S Range 27 W County LANE KANSAS State Test Approved By KIM SHOEMAKER MIKE COCHRAN Diamond Representative 4600 ft. Total Depth\_ 4533 ft. to 4600 ft Formation Test No. Interval Tested from 4528 ft. Size\_ 6 3/4 NA ft. Size 6 3/4 Packer Depth Packer depth in. 4533 ft. Size 6 3/4 NA ft. Size\_ Packer Depth 6 3/4 Packer depth Depth of Selective Zone Set 4515 ft 30044 Cap. 5,000 P.S.I. Top Recorder Depth (Inside) Recorder Number 4597 ft. 3,875 P.S.I. 13386 Cap. Bottom Recorder Depth (Outside) Recorder Number Below Straddle Recorder Depth Recorder Number Cap. P.S.I. 0 ft. I.D. Mud Type CHEM 51 Viscosity Drill Collar Length\_ 2 1/4 9.3 0 ft. I.D.\_\_ 8.8 Weight Water Loss cc. Weight Pipe Length 2 7/8 3,200 p.p.M. 4501 ft. 3 1/2 Chlorides Drill Pipe Length **STERLING** 32 ft. Tool Size 3 1/2-IF Jars: Make Serial Number Test Tool Length NO NO Did Well Flow? Reversed Out Anchor Length 52 <sub>ft.</sub> Size 4 1/2-FH (32' D.P.) Surface Choke Size 4 1/2 XH in. Bottom Choke Size 5/8 Main Hole Size Tool Joint Size Blow: 1st Open: STRONG 4" BLOW RIGHT AWAY, INC. BOB 1 MIN 20 SEC (NO BB) 2nd Open: WSB, BUILT TO BOB IN 31/2 MIN (WEAK 1/2 BB) 186 ft. of GIP Recovered GRAVITY: 36.8@60° 107 ft of CO 100% OIL Recovered 1381 ft of GHOCMW 10% GAS, 29% OIL, 46% WTR, 15%MUD Recovered 744 ft of GMW 95% WTR, 2% GAS, 3% MUD W/ SCUM OF OIL Recovered 2232 ft. of \_\_\_ **TOTAL FLUID** CHLOR:15.000 PPM Price Job Recovered RW: .36 @ 84° ft. of Other Charges Recovered PH: 7.0 Remarks: Insurance TOOL SAMPLE: 1% OIL, 97% WTR, 2% MUD Total A.M. A.M. 3:15 A.M. 6:45 A.M. 136 Time Set Packer(s) P.M. Time Started Off Bottom P.M. Maximum Temperature 2199 P.S.I. Initial Hydrostatic Pressure.....(A) 749 P.S.I. 30 227 P.S.I. to (C)\_\_\_\_ Initial Flow Period...... Minutes 60 992 P.S.I. Initial Closed In Period...... Minutes (D) 960 P.S.I. 45 761 P.S.I. to (F)\_\_\_\_ (E) 993 P.S.I. 75 Final Closed In Period......Minutes (G) 2190 P.S.I. Final Hydrostatic Pressure.....

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

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

September 14, 2011

Clarke Sandberg Raymond Oil Company, Inc. PO BOX 48788 WICHITA, KS 67202-1822

Re: ACO1 API 15-101-22293-00-00 Michaud Trust 3 SE/4 Sec.21-18S-27W Lane 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, Clarke Sandberg