



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1064842

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: _____



1064842

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 ☐ Yes ☐ No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey ☐ Yes ☐ No Cores Taken ☐ Yes ☐ No Electric Log Run ☐ Yes ☐ No Electric Log Submitted Electronically ☐ Yes ☐ No <i>(If no, Submit Copy)</i> List All E. Logs Run:	☐ Log Formation (Top), Depth and Datum ☐ Sample Name Top Datum
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CASING RECORD ☐ New ☐ 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 <i>(Explain)</i> _____		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. <i>(Submit ACO-5)</i> ☐ Commingled <i>(Submit ACO-4)</i> ☐ Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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McGown Drilling, Inc.

Mound City, Kansas

Operator:

Oil Sources Corporation
7105 W 105th Street
Overland Park, KS 66212

Well: Two Brothers #2

S-T-R S5-T16-R21

County: Franklin Co, KS

API:

Spud Date: 9/10/2011 **Surface Bit Size:** 9.875"

Surface Casing: 7" **Drill Bit Size:** 5.625"

Surface Length: 23'

Surface Cement: 4 sx

Surface Call: Chris M.

Driller's Log

Top	Bottom	Formation	Comments
0	3	Soil	
3	39	Clay	
39	43	Shale (muddy)	
43	48	Lime	
48	51	Shale	
51	67	Lime	
67	74	Shale	
74	85	Lime	
85	91	Sand	
91	106	Lime	
106	164	Shale (sandy)	
164	174	Lime	
174	185	Sand & Shale	
185	249	Shale	
249	252	Lime	
252	253	Shale	
253	267	Lime	
267	269	Shale	
269	272	Lime	
272	298	Sandy Shale	
298	304	Lime	
304	363	Shale	
363	385	Lime	

Office: 913-795-2259
Chris' Cell: 620-224-7406

mcgowndrilling@gmail.com

PO Box K
Mound City, KS 66056

385	391	Shale
391	416	Lime
416	421	Shale
421	425	Lime
425	427	Shale
427	433	Lime
433	552	Shale
552	560	Sand
560	564	Sandy Shale
564	605	Shale
605	611	Lime
611	658	Shale
658	660	Lime
660	673	Shale
673	675	Lime
675	678	Shale
678	679	Lime
679	703	Shale
703	710	Light mucky shale
710	712	Shaley sand
712	727	Oil sand
727	763	Sandy Shale
	763	TD

clean - gas?
Fair saturation bleed, better
after 715

Coring	Core Run	Footage	Recovery
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Long String:			
754.75'		2 7/8 from Buckeye	

Long String
Cement:

Long String and
Cement Call:



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 32057
LOCATION Ottawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/13/11	5949	Twohros #2	NW 5	16	21	FR
CUSTOMER Oil Sources Corp						
MAILING ADDRESS 7105 W 105th						
CITY Overland Park	STATE KS	ZIP CODE 66212				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			506	FREMAD	Safety	MTG
			368	KENHAM	RH	O
			370	ARLMCD	ARM	
			548	GARMOD	GDM	

JOB TYPE Longevity HOLE SIZE 5 7/8 HOLE DEPTH 963' CASING SIZE & WEIGHT 2 3/4 EUE
CASING DEPTH 952 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Plug
DISPLACEMENT 4.36 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish pump rate. Mix Pump 100# Premium Gel Flush
Mix Pump SKS 50/50 for Mix Cement 2 3/4 Gel Cement
to surface. Flush pump & lines clean. Displace 2 3/4" Rubber
plug to casing TD w/ 4.36 BBL Fresh Water Pressure to 750
PSI. Release pressure to set float valve. Shut in casing.

McGown Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368.00	975.00
5406	-0-	MILEAGE Truck on lease	388	N/C
5407	1/2 minimum	Ten Miles		165.00
5407	@ 752	Casing footage		N/C
5502C	1 1/2 hrs	80 BBL Vac Truck		135.00
1104	106 SKS	50/50 for Mix Cement		1107.20
1118B	275#	Premium Gel		55.60
4402	1	2 3/4" Rubber Plug		28.00
Less 5% Discount			-127.96	
Total			2431.26	
2442.77			7.8%	
			SALES TAX	92.93
			ESTIMATED TOTAL	2559.22

Ravin 3737

AUTHORIZATION

TITLE

DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's conditions of service on the back of this form are in effect for services identified on this to