

Kansas Corporation Commission Oil & Gas Conservation Division

1064844

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 ☐ 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?
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: Conv. to ENHR	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 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 III Approved by: Date:

Side Two



Operator Name:				Lease N	lame:			Well #:		
Sec Twp	S. R	East] West	County:						
INSTRUCTIONS: Sh time tool open and clo recovery, and flow rat line Logs surveyed. A	osed, flowing and shu es if gas to surface te	t-in pressures st, along with	s, whether s final chart(s	hut-in press	ure reach	ed static level,	hydrostatic pres	ssures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taker (Attach Additional		Yes	☐ No		Log	g Formation	n (Top), Depth a	nd Datum		Sample
Samples Sent to Geo	logical Survey	Yes	No		Name			Тор		Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Cop)	d Electronically	☐ Yes ☐ Yes ☐ Yes	No No No							
List All E. Logs Run:										
		Report a		RECORD	New	Used	on, etc.			
Purpose of String	Size Hole Drilled	Size C Set (In	asing	Weig Lbs. /	ht	Setting Depth	Type of Cement	# Sacks Used	, ,,	and Percent additives
		<u> </u> 	DDITIONAL	CEMENTIN	IG / SQUE	EZE RECORD				
Purpose: Depth Top Bottom Type o — Perforate — Protect Casing — Plug Back TD — Plug Off Zone		Type of 0	Cement	# Sacks	Used		Type and	Percent Additives		
Shots Per Foot	PERFORATI Specify	ON RECORD - Footage of Each	Bridge Plug n Interval Peri	s Set/Type forated			cture, Shot, Ceme mount and Kind of N	nt Squeeze Record Material Used)	d 	Depth
TUBING RECORD:	Size:	Set At:		Packer At:		Liner Run:				
							Yes N	0		
Date of First, Resumed	Production, SWD or EN	IHR. Pr	oducing Meth	nod:	g	as Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	BI	ols.	Gas-Oil Ratio		Gravity
DISPOSITI	ON OF GAS:		N	METHOD OF	COMPLET	TION:		PRODUCTIO	ON INTER	VAL:
Vented Solo	Used on Lease		n Hole	Perf.	Dually (nmingled mit ACO-4)			
(11 verneu, 3u	10./	Othe	r (Specify)				I —			

McGown Drilling, Inc.

Mound City, Kansas

Operator:

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

Well:

Two Brothers #7

S-T-R

S5-T16-R21

County:

Franklin Co, KS

API:

Spud Date:

9/13/2011 **Surface Bit Size**:

9.875"

Surface Casing:

7" Drill Bit Size:

5.625"

Surface Length:

21.25'

Surface Cement:

5 sx

Surface Call:

Chris M.

Driller's Log

Top Bottom		ottom	Formation	Comments
	0	3	Soil	
	3	51	Clay	
	51	57	Lime	
	57	59	Shale	
	59	76	Lime	
	76	85	Shale	
	85	94	Lime	
	94	100	Shale	
	100	124	Lime	
	124	166	Shale	
	166	179	Lime	
	179	197	Sandy Shale	
	197	254	Shale	
	254	257	Lime	
	257	258	Shale	
	258	277	Lime	
	277	303	Sand, shale	
	303	308	Lime	
	308	367	Shale	
	367	374	Lime	
	374	378	Shale	
	378	391	Lime	

Office: 913-795-2259

Chris' Cell: 620-224-7406

mcgowndrilling@gmail.com

PO Box K Mound City, KS 66056

391	401	Shale
401	424	Lime
424	428	Shale
428	432	Lime
432	435	Shale
435	441	Lime
441	550	Shale
550	555	Sandy Shale
555	567	Sand
567	580	Sandy Shale
580	602	Shale
602	604	Lime
604	614	Shale
614	623	Lime
623	673	Shale
673	675	Lime
675	715	Shale
715	717	Clean sand
717	730	Sand
730	763	Shale
	763	TD
712	727	Oil sand
727	763	Sandy Shale
	763	TD

Soft brown, mud grain, fair saturation, good stain

Coring

Core Run Footage Recovery

Long String:

747.8'

2 7/8 from Buckeye

Long String Cement:

Long String and Cement Call:



TICKET NUMBER	32864
LOCATION Off and	ac KS.
FOREMAN FOOD O	Nader

P	OX	884,	Cha	nute,	KS	66720	
620	431	-9210	or (800-	467-	8676	

FIELD TICKET & TREATMENT REPORT

620-431-9210	or 800-467-8676			CEMEN	T			
DATE	CUSTOMER#	WELL	NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
9/JU//I CUSTOMER	5949	Twobra	SHET		NW 5	16	20	FR
	1 6							
MAILING ADDRE	1 Souve	es corp			TRUCK#	DRIVER	TRUCK#	DRIVER
	5 W 10					FREMAD KENHAM	Surry M	7
CITY	3 W 10	STATE	ZIP CODE		368	ARLMOD		
	udPark		66212		505/7106	GAR MOD	ARM	
	no string	HOLE SIZE_		UNI E DEDTI	548	CASING SIZE & V	JEIGHT 27/c	FUE
CASING DEPTH	1	DRILL PIPE				CASING SIZE & V	OTHER	_ 0 &_
	T				:k	CEMENT LEFT in	CASING 25"	Pluc
	T 4.34 BB					RATE 48PM	1	7
						of Premi		7)4814
Mix	* Pome	2 110	K 50	150 Das	mix Co	ment 2	2 CD. F	-lush
Da W	0 + /me	s clear	n. Dis	place	2/2" Ru	ber plus	to cas	. (4
TD	W/4.34	BBLS	Fresh	water	· Pressu	e to 780	£ 151.	-
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Mc	voun Dr	rilling				Ful W	laclin	
, ,		0				1		
CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES or PR	орист	UNIT PRICE	TOTAL
5401	1		PUMP CHARG	E				97500
540 6	=	20 m:	MILEAGE					8000
5402	7	47	Casiva	& foota	94			MC
5407	Minir	num	Ton m					33000
55010		12 hrs	Trans	spert				16800
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1124		110 5163	50/50	Pozmix	Coment			114950
1118B	2	85	Prem	ium Ge	.0			(5) 00
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Ravin 3737	X	./	/				ESTIMATED	2883 79
ALITHODISTICH	h-		/	TITLE			TOTAL	~
AUTHORIZTION	1	1					DATE	
I acknowledge	that the payme	ent terms, unl	ess specifica	ily amended	in writing on t	ne front of the fo	orm or in the c	customer's