

Kansas Corporation Commission Oil & Gas Conservation Division

1064978

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:	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
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 Twp S. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or 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 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 rate line Logs surveyed. A	osed, flowing and shu es if gas to surface te	t-in pressures, st, along with f	whether sh inal chart(s	nut-in press	ure reach	ed static level,	hydrostatic pres	sures, bottom h	ole temp	erature, fluid
Drill Stem Tests Taker (Attach Additional S		Yes	No		Log	y Formation	n (Top), Depth a	nd Datum		Sample
Samples Sent to Geo	logical Survey	Yes	No		Name			Тор	I	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Copy	d Electronically	Yes Yes Yes	☐ No ☐ No ☐ No							
List All E. Logs Run:										
		Report all	CASING I		New	Used mediate, producti	on, etc.			
Purpose of String	Size Hole Drilled	Size Ca Set (In C	sing	Weigi Lbs. /	ht	Setting Depth	Type of Cement	# Sacks Used	, ,,	and Percent dditives
		AI	DDITIONAL	CEMENTIN	G / SQUE	EZE RECORD				
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom Type of Cement			# Sacks	Used		Type and	Percent Additives		
Shots Per Foot	PERFORATI Specify I	ON RECORD - Footage of Each	Bridge Plugs Interval Perfo	s Set/Type orated			cture, Shot, Cemei mount and Kind of N		d	Depth
TUBING RECORD:	Size:	Set At:		Packer At:		Liner Run:				
Date of First, Resumed	Production, SWD or EN		ducing Meth	od:		as Lift C	Yes No	0		
Estimated Production Per 24 Hours	Oil	Bbls.		Mcf	Water		ols.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		M	IETHOD OF	COMPLET	ION:		PRODUCTIO	ON INTER	VAL:
Vented Sold	Used on Lease	Open	Hole (Specify)	Perf.	Dually ((Submit AC		nmingled mit ACO-4)			





TICKET NUMBER 30174

LOCATION EURON KS

FOREMAN Rick Leafurd

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

FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER #	W	ELL NAME & NUI	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
CUSTOMER	lele05	Lehma	ma #11					
Joseph Comment	Freet Oc			Safety				Coffey
MAILING ADDR	RESS	clapment		meeting	TRUCK#	DRIVER	TRUCK#	DRIVER
ρ	O. Box 41	2		Q JM	520	Cliff		
CITY	5. 130% 77	STATE	ZIP CODE	152	441	Jim		
	ماه	125			83	Scatt CM	(Cox Text)	
JOB TYPE la			66249	_				
CASING DEPTH	1 /020'	HOLE SIZE_	57/2"	HOLE DEPTH		CASING SIZE & W	EIGHT	
SLURRY WEIGH		DRILL PIPE_		_TUBING27			OTHER_	
DISPLACEMEN'		SLURRY VOL		WATER gal/sk	2.1	CEMENT LEFT in C	CASING O'	
		DISPLACEME	NT PSI_SOO_	MIX PSI				
D .	19tery mee	ting - King	4 6 2	2º/8" the	. Brook	RATE	15 84	uetr.
			<u> </u>	TV YALE	אור אור אור אור	135 AVA 7		JOHN.
\sim \sim				<u> </u>	+ //// a	: L L		
- Displa			- WEIT- 7	1091 00-0	MIRKSING "	ON DATE O.	1 . /1/	<u>ρω33.</u>
over d	15phceant	Plus never	hit. Gar	cenet t	Susare	Seb complete.	D 1	6/
						HED COMPTER.	King dawn.	
								
	_		1.0	Then 6 11				· ·

THANK Tai

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	/	PUMP CHARGE		+
5406	40	MILEAGE	925.00	
			3.65	146.00
1126	135 sus	OUC cerest		
11624	683	Y2" phenason / sx	12.00	2275.00
		The second of th	1.15	28.20
11188	300#	gel-flush		
			. 26	60.00
5407A	7.02	ton mileage bulk tox	/ 0	0.01
55026	3.5 hs	SO GOI VAC. TEX	1.20	334.9
1123	3000 9014	City water	85.00	277.5
			14.90/1000	94.7
4402	2	2%" top cubba plays	23.00	46.08
		(Oo Chara		
		(10 Charge		
	<u></u>	4.37	Sub tatal	4229.34
3737	11 1	/ 839453	ESTIMATED	159.01
HORIZTION C	HID was I	7 001905	TOTAL	4388.37

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.

Hodown Drilling



P.O. Box 92 Yates Center, KS 66783 (719) 210-8806 (620) 330-6328

Andrew King & Steven Leis (Owners)

BILL TO:

Consolidated Oil Well Services, LLC

DATE: June 17, 2011 **INVOICE #**

FOR:

Well # Lehmann 11

API#15-031-22814

DESCRIPTION	HOURS	RATE	AMOUNT
Drilled 1030' 5 7/8" hole		6.00	\$ 6,180.00
run long string 2 7/8"		250.00	250.00
set surface (10 sacks cement)		included	
	·		
		SUBTOTAL	\$ 6,430.00
		TAX RATE	
		SALES TAX	
		OTHER	
		TOTAL	\$ 6,430.00

Make checks payable to Hodown Drilling
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

Yates Center, KS

Lease Name: lehmann	Spud Date: 1-21-2011	Surface Pipe Size: 7"	Depth: 40'	T.D.:1030
Operator: Quest Development	Well # 11	Bit Diameter: 5 7/8"		
· ·				
Footage taken	Sample type	, , , , , , , , , , , , , , , , , , ,		
0_3	soil			1
3_18	clay/gravel			
18_117	shale			
117_122	lime	747		
122_130	shale			
130_158	lime			
158_171	shale			 -
171_233	lime			
233_335	shale			
335_393	lime	~		
393_414	shale			ļ
414_417	lime			
417_435	brown shale			
435_490	lime			
490_495	shale			
495_499	shale			
499_510	lime	· · · · · · · · · · · · · · · · · · ·		
510_517	shale			
517_533	lime			
533_540	shale			
540_560	lime			
560_730	shale			
730_735	lime			
735_750	shale			
750_758	lime		-	
758_830	shale			-
830_838	lime			
838_854	shale			
854_858	lime			
858_873	shale			
873_881	lime		~	
	shale			
	lime			
887_896	shale			+
896_897	lime			
897_900	shale			
900_904	lime			
904_910	shale			
910_915	lime			
915_949	shale			
949_950	cap rock	-		
950_956	shale		-	
956_958	cap rock			
958_967	oil sand			
967_971	broken			
971_1030	shale			
	T.D.			
-				
	-	1		