

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1067251

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:		Sec	TwpS. R 🗌 East 🗌 West
Address 2:		Fe	eet from Dorth / South Line of Section
City: State: Zip	+	Fe	eet from East / West Line of Section
Contact Person:			Nearest Outside Section Corner:
Phone: ()		,	/ SE SW
CONTRACTOR: License #			
Name:		-	Well #:
Wellsite Geologist:			VVCII #
0			
Purchaser:		C C	Kelle Davidson
Designate Type of Completion:			Kelly Bushing:
New Well Re-Entry	Workover	·	ug Back Total Depth:
Oil WSW SWD	SIOW	Amount of Surface Pipe Se	et 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, c	ement circulated from:
Cathodic Other (Core, Expl., etc.):		feet depth to:	w/sx cmt
If Workover/Re-entry: Old Well Info as follows:			
Operator:			
Well Name:		Drilling Fluid Managemen (Data must be collected from th	
Original Comp. Date: Original Tot	tal Depth:		
	ENHR Conv. to SWD	Chloride content:	ppm Fluid volume: bbls
Conv. to	GSW	Dewatering method used: _	
Plug Back: Plug		Location of fluid disposal if	hauled offsite:
Commingled Permit #:	-	Operator Name:	
Dual Completion Permit #:			
SWD Permit #:			License #:
ENHR Permit #:		Quarter Sec	TwpS. R [_] East [_] West
GSW Permit #:		County:	Permit #:
Spud Date or Date Reached TD Recompletion Date	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 II Approved by: Date:					

	Side Two	1067251
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 She	eets)	Yes	No		og Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolog		Yes	No	Nam	1e		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	☐ Yes ☐ Yes ☐ Yes	│ No │ No │ No					
List All E. Logs Run:								
		Report al		RECORD N	ew Used ermediate, producti	ion, etc.		
Purpose of String	Size Hole Drilled	Size Ca Set (In	asing	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				RECORD - Bridge Plugs Set/Type age of Each Interval Perforated					ement Squeeze Record d of Material Used)	Depth
TUBING RECORD:	Si	ze:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed F	Product	ion, SWD or ENHF	λ .	Producing N		ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:		METHOD OF COMPLE		TION:		PRODUCTION INTER	RVAL:			
Vented Sold		Used on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Sub	mit ACC)-18.)		Other (Specify))					

Drillers Log

Well Name Price Well # I-2

Cement Amounts <u>3 Sacks</u>
 April 15
 15-059-25736-00-00

Cement Date 10/27/11

Well Depth 720

Casing Depth 703

		poog 099-829	
		poog 828-728	bnes lios qot
		979	chale
		829	əmil
		819	əleda
		219	əmil
		τ09	əleriz
		285	amit
		445	əleriz
		246	əmil
		SID	əlehz
		382	əmil
		222	leop
		222	amil
		318	əlehz
		282	əmil
		797	əledə
		ZS Z	əmil
		182	əleda
		510	əmil
		742	əledz
		STT	əmil
		L9	əlehz
		63	red bed
		۲S	əmil
		75	shale
		44	amil
		98	coal
		LT	amil
		S	əledz
		0	top soil
Depth	<u>noitem10-</u>	Depth	Formation
	Bol sis	Drill	

To:9138372241

Price I-2

660-661 good 661-662 good 662-663 v good 663-665 v good 665-666 v good 666-667 v good 667-668 good 668-669 mix shale 669-671 mix good 671-672 mix good 672-673 mix good 673-675 mix 675-677 shale 674 674 720 703

stop oil sand shale stop drilling casing pipe

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OCT-27-2011 11:07 From:

CONSOLIDATED

AUTHORIZTION

TICKET NUMBER	33027
LOCATION DITA	wa
FOREMAN Alan	Made

RANGE

Oil Well Services, LLG

FIELD TICKET & TREATMENT REPORT

PO Box 884, 620-431-9210	FI	
DATE	CUSTOMER #	WE
The second s		

CEM	ENT		
ELL NAME & NUMBER	SECTION	TOWNSHIP	
	112 12		

	· · · · · · · · · · · · · · · · · · ·							
10.27.11	5949	Price	I.2		SE 18	16	21	FR
CUSTOMER	n					DRIVER	TRUCK #	DRIVER
MAILING ADDRE	ources				TRUCK#	1	C P.X	Moet
		-+4			216	Alann	SPAT	anoer
7105	W 105	TATE	ZIP CODE		060	Arlen NI	JIN/	
CITY					610	6904 11	GM	
Overla.	nd Park	153	66212		510	Keith C	KC TO	5 02/0
JOB TYPE On	5 String H		6	HOLE DEPTH	1 100	CASING SIZE & V		020
CASING DEPTH	7000 D			TUBING			OTHER	6
SLURRY WEIGH	IT S	LURRY VOL	8	WATER gal/s	ik	CEMENT LEFT in	1 1	2
DISPLACEMENT	<u>41</u> 0	DISPLACEMENT	PSI 000	MIX PSI	200	RATE 5	spin	
REMARKS: 17	eld crei	w me	e tins	. Egt	a 61:54	ed vat	e. M.	xed
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STC	Drilling						-1	/
	0					M	ader	
-						Alm		
					/	y series		
ACCOUNT	QUANITY o	or UNITS	DE	SCRIPTION O	f SERVICES or PR	ODUCT	UNIT PRICE	TOTAL
CODE				NE.				97500
5901			PUMP CHARG				1.	
5406			MILEAGE	- A	1			
55102	700		Gasi	5.70	dtage			10=02
5407	1 2	min_	Ton	miles	2			125.00
5502C	12	2	80	JAC_				100.00
PNS7 (2015)			1				7	

701				
65D21	1/2	80 240		135.00
VStal				
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Ravin 3737	\square	1	ESTIMATED	11.289
	≤ 11		TOTAL	Ku vil.
AUTHORIZTION		TITLE	DATE	

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's

TITLE

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COUNTY