



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1068584

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: _____



1068584

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
 (Attach Additional Sheets)

 Samples Sent to Geological Survey ☐ Yes ☐ No

 Cores Taken ☐ Yes ☐ No

 Electric Log Run ☐ Yes ☐ No

 Electric Log Submitted Electronically ☐ Yes ☐ No
 (If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum
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 (Amount and Kind of Material Used)	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 (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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


CONSOLIDATED
 Oil Well Services, LLC

 PO Box 884, Chanute, KS 66720
 620-431-9210 or 800-467-8676
TICKET NUMBER 32955LOCATION Ottawa KSFOREMAN Fred Mader
FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/14/11	7532	Thomas # I-28	NE 29	14	22	JO
CUSTOMER ST Petroleum			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 18800 Edgerton Rd			506 FREMAD Safety Mfg			
CITY Edgerton STATE KS ZIP CODE 66024			495 HARBEC HMB			
			548 KEICAR KC			
			505/TING CASKEN CIC			

 JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 918 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 907 2 DRILL PIPE 897 to TUBING Baffle OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug #10'
 DISPLACEMENT 5.22 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

 REMARKS: Establish pump rate. Mix Pump 1/2 Gal ESA-41 + 1/2 Gal HE-100
 Polymer Flush. Circulate from pit to condition hole.
 Mix Pump 124 sks 50/50 Por Mix Cement 2 7/8 Gal 1/4" FLO
 Seal/sk. Cement to surface. Flush pump & lines clean.
 Displace 2 1/2" Rubber plug to bottle in casing w/ 5.22 BBLs
 Fresh Water. Pressure to 800 PSI. Hold pressure for
 30 min MIT. Release pressure to set float valve.

Tool Drilling (wes).

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	975 ⁰⁰
5406	30 mi	MILEAGE	495	120 ⁰⁰
5402	907	Casing footage		NK
5407	Minimum	Ten Miles	548	330 ⁰⁰
5502C	2 hrs	Transport	505/103	224 ⁰⁰
1124	124 sks	50/50 Por Mix Cement		1295 ⁸⁰
118B	308*	Premium Gel		61 ⁶⁰
1107	31*	FLO Seal		68 ⁸²
4402	1	2 1/2" Rubber Plug		28 ⁹⁰
7.5252				SALES TAX
				ESTIMATED
				TOTAL
				109 ⁴⁴
				3212 ⁶⁶

Ravin 3797

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
 statement of work and conditions of service on the back of this form are in effect for services identified on this form

Johnson County, KS
Well: Thomas A I-28
Lease Owner:ST Petroleum

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
10/13/2011

WELL LOG

Thickness of Strata	Formation	Total Depth
0-15	Soil-Clay	15
10	Shale	25
5	Lime	30
25	Shale	55
22	Lime	77
11	Shale	88
8	Lime	96
7	Shale	103
19	Lime	122
17	Shale	139
20	Lime	159
7	Shale	166
53	Lime	219
22	Shale	241
8	Lime	249
18	Shale	267
6	Lime	273
6	Shale	279
8	Lime	287
31	Shale	318
2	Lime	320
10	Shale	330
19	Lime	349
2	Shale	351
4	Lime	355
9	Shale	364
23	Lime	387
4	Shale	391
4	Lime	395
4	Shale	399
6	Lime	405
113	Shale	518
17	Lime	535
43	Shale	578
10	Lime	588
6	Shale	594
2	Lime	596
1	Shale	597
4	Lime	601
15	Shale	616

Johnson County, KS
Well: Thomas A I-28
Lease Owner:ST Petroleum

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
10/13/2011

3	Lime	619
7	Shale	626
4	Lime	630
5	Shale	635
1	Lime	636
28	Shale	664
3	Lime	667
47	Shale	714
1	Lime	715
20	Shale	735
1	Sand	736
1	Lime	737
10	Sand	747
2	Sand	749
5	Sandy Shale	754
14	Shale	768
3	Lime	771
87	Shale	858
6	Sand	864
5	Sand	869
1	Sand	870
3	Limey Sand	873
4	Limey Sand	877
1	Limey Sand	878
8	Sandy Shale	886
32	Shale	918-TD