

Kansas Corporation Commission Oil & Gas Conservation Division

1069850

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	Amount of Surface Pipe Set 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, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Christ Management Dlan
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content:ppm Fluid volume:bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	Dewatering method used:
Conv. to GSW	Dewatering metriod 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 #:	
☐ ENHR Permit #:	Quarter Sec TwpS. R
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 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 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 Type of Cement			ement	# 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 (nmingled mit ACO-4)			

CONSOLIDATED OF WAS SUIVED. LLC



TICKET NUMBER 33204

LOCATION EUGEN

FOREMAN REK Leiferd

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-9679 FIELD TICKET & TREATMENT REPORT

620-431-9210	or 800-467-867			CEMEN'	T AP	7 4 15-205-2	17004	1
DATE	CUSTOMER#	WE	LL NAME & NUI	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-27-11 CUSTOMER	5405	Marse	# /3		/3	285	15€	Wilson
	🔥	00-					75 - 120k	6.54
MAILING ADDR	ach Course	- PD1 0	<u> </u>	-	TRUCK#	DRIVER	TRUCK#	DRIVER
					520	Allen B.		
CITY	85 180 to 5			_}	441	Im		
		STATE	ZIP CODE					
Eure	Y.A	125	67045	1 [
JOB TYPE	/s 0	HOLE SIZE_		HOLE DEPTH		CASING SIZE & W	EIGHT	
CASING DEPTH	† <u>999</u>	DRILL PIPE		TUBING_27	· *		OTHER	
SLURRY WEIGI	HT /3 6#	SLURRY VOL	28 M	WATER CHILD	. 00	CEMENT LEFT in	OINER	A'IPPACE.
DISPLAÇ EMEN	T_58W	DISPLACEME	NT PSI 474	MATERIA SELECTION	A /	CEMERI LEFT IN	CASHIG U	
REMARKS: S	alth mark	O	09/a	_)	RAIE		
0 4	***	'' ''	p 15 2-18	TUBEO 3 1	NEAR CICL	lation uf 4	1361 fresh	Lieft.
	<u> </u>	AND S. CYBI	9 AC 961 1	Sid face	w/pit wa	te. Mirad 1	to sus c	IWC .
CEMAC_	/ 12 man	Real /Sr (o	/3.6=/9	el. Washou	of purp +	LARS, Shut	down rela	ose
/etcb_	dava plua	Oraloro	w/ 5.8	Bal fresh we	de final	Prop pressure	500 PST	Rusa
plus_t	A IGEO PSI.	wast 2	ennaks, reli	rese Describe	Dat + A	is held. Classic	1 4 11 24 4	7 -
PST G	and count in	there is the s	ے۔ مسئلی	01.1 - L 4	-54 -KL	appeto lig do	- M. J. K	
				************	1000	THE TO MY MAN	<u>^</u>	
Oak : Oa	t mater &	C).	4	550 f				

Note: Ran whiche, togged floot she @ 999'

		"There's Gooding!"	***	
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
596)		PUMP CHARGE	975.00	975.00
5406	<u> </u>	MILEAGE 200 well of 2	ale	a/c
1126	110 ses	Owc covert	17.96	1949.00
11074	55 *	1/2* phenem) /ex	1.22	£7.10
1/18/5	200*	gel-Elush	.20	40.00
5402	5"	ten mileage bulk tre	m/t	330.04
4/27	2	27/5" cortichens	40.00	80-00
4152		7718 flast shee	147.00	147.06
4450		27/2 letch days who	162.00	162.00
		090 Decopot		
		(<196.84) (<196.84)	205tetal 2 SALES TAX	3770.10
in 3737	las R 1	AUDITAU .	ESTIMATED	<i>155</i> . 31 3725. 41

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.

ease Name; Morse	Spud Date: 9/28/2011	Surface Pipe Size: 7"	Depth: 20'	TD:1005
Operator: Gary Massey	Well # 13	Bit Diameter: 5 7/6"	· · · · · · · · · · · · · · · · · · ·	
		The same of the sa	- 1 	 .
ootage taken	Sample type			· · -
)_5	soil			
	clay			
2_17		1 0 m d - color		<u>.L</u> .
7_49	sand			-
/_49	shale			
9_63	lime)		- [
3_158	shale			·
58_167	lime	·		
67_236	shale			-
36_243	ime			
243_259	shale		<u> </u>	ļ
59_362				1
62_370	ime	·	į	<i>i</i>
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70_375	Ilme			†·· ··-
75_381	shale		•••	 - ·
81_475	lime			
75_556	shale			Ļ
56_568	llme	3 100 1 100 miles and 1 miles	1	
68_574	shale		į	<u>i</u>
74_590	lime			
90_622	* 1 · · · · · · · · · · · · · · · · · ·			į
	shale			i
22_625	lime	i		†-
25_670	shale		···	
70_674	lime			ļ
74_680	shale			i
30_686	lime			
36_689	shale			!
9_703			į	1
	Ilme			;
03_721	shale			
21_723	lime			
23_734	shale		-} .	
34_747	lime			<u></u>
7_753	shale			
53_758	lime			Ĺ., .
58_832			ì	
32_834	shale			<u> </u>
	lime		·]	
34_845	shale		· · · · · · · · · · · · · · · · · · ·	
5_848	lime		<u> </u>	
8_933	shale	† · · · · · · · · · · · · · · · · · · ·		
3_938	black shale			
8 941	Igray shale	-		
1_944				
4_959	oil show	i		
	oil sand	!		
9_964	good oli sand/some black sand	<u> </u>		
4_1005	shale			
100	5 TD			
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