

Kansas Corporation Commission Oil & Gas Conservation Division

1072352

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 ☐ SHOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW ☐ OG ☐ GSW ☐ Temp. Abd. ☐ CM (Coal Bed Methane) ☐ CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?				
Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:				
If Workover/Re-entry: Old Well Info as follows:	feet depth to: w/ 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 Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #: SWD Permit #: ENHR Permit #: GSW Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name: License #: Quarter Sec Twp S. R				
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 Nar	me:			_ Well #:	
Sec Twp	S. R	East West	County: _					
INSTRUCTIONS: Shortime tool open and clos recovery, and flow rates line Logs surveyed. Att	ed, flowing and shut if gas to surface tes	in pressures, whether s it, along with final charte	shut-in pressur	e reache	d static level,	hydrostatic pres	sures, bottom h	ole temperature, fluid
Drill Stem Tests Taken Yes No (Attach Additional Sheets)				Log	Formation	n (Top), Depth ar	nd Datum	☐ Sample
Samples Sent to Geological Survey			Name			Тор		
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy) List All E. Logs Run:		Yes No Yes No Yes No						
		CASING	RECORD	Now	Used			
		Report all strings set-		New ce, interme		on, 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
		ADDITIONA	L CEMENTING	/ SOUFF	ZE RECORD			
Purpose: Depth Top Bottom Protect Casing Plug Back TD Plug Off Zone					Type and I	e and Percent Additives		
1 ldg 0ll 20ll0								
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:	Li	ner Run:	Yes No)	
Date of First, Resumed P	roduction, SWD or EN	Producing Met	hod:	Gas	Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	Bl	ols.	Gas-Oil Ratio	Gravity
DISPOSITION Vented Sold (If vented, Subn	Used on Lease	Open Hole	METHOD OF CO	OMPLETIC Dually Con Submit ACO	mp. Con	nmingled mit ACO-4)	PRODUCTIO	ON INTERVAL:

DATE 1-5-12 SWIFT Services. Inc. JOB TYPE SOURCE PROFE TICKET NO. WELL NO. BYROM 21581-21582 CRETAR PEDROLEUM 2-34 PRESSURE (PSI) PUMPS CHART NO. VOLUME BBLDGALT **DESCRIPTION OF OPERATION AND MATERIALS** TIME CASING TUBING (BPM) ON LOCATION 1230 TURTIX- 23/8 CASENG- 512" RRP-4410 PEDES-4360-65 (SQUEEZE) (3007) DO 17 SQUEEZ PUR-4187' SQUEEZE (10 OUT FLe1100' PUR 4378 CLEAN HOLE SET PW6 = 4410' 4 50 500 1400 289=4410 PX2= 4400 TEST - HELD 1500 1430 SPOT 2 SIS SAUS PURE 4378' 1500 14 SPOT 200 GAL 15% ACON = 4378' 2 18 400 1600 500 PULL PRETO 4187' - INT RATE - PSTANNIUS SE 11/2 1250 1620 MEX CEMENT 75 SKS STAZINED (25#HALLS 15 725 KS 1000 AUG 11/2 1630 DISPLACE COMPUT 11/2 0 600 1640 8 11/2 008 14 1750 " TURDIG CLEAR 16 14 314 2000 " SHOT DOWN בלידיו 3/4 1652 2200 SHUT IN - WASH TRUCK 2000 00m 1800/2250 17/2 STAGE 1715 RELEASE - HELD 1740 2250 REVERSE CLEAN 400 25 1750 PULL 5 JIS PST_SONEEZE - HEW - SHUTZN 500 1815 TOC: 4260 ± 65 SKS CEMENT IN PERFORATIONS JOB COMPLETE 1830 THANK YOU WANE BLADE LANE