

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1076126

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 &	ያ LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
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:
New Wein       New Wein       New Wein       New Wein         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:	Amount of Surface Pipe Set and Cemented at: Feel Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feel If Alternate II completion, cement circulated from: feet depth to: w/ sx cmt
Operator: Well Name: Original Comp. Date: Original Total Depth:	Drilling Fluid Management Plan         (Data must be collected from the Reserve Pit)         Chloride content:      ppm         Fluid volume:      bbls
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Dewatering method used:
Conv. to GSW     Plug Back: Plug Back Total Depth     Commingled Permit #:     Dual Completion Permit #:     SWD Permit #:	Location of fluid disposal if hauled offsite: Operator Name: License #:
ENHR         Permit #:	Quarter Sec TwpS. R East West
GSW Permit #:	County: Permit #:
Spud Date or Recompletion Date         Date Reached TD         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 III Approved by: Date:

	Side Two	
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		Yes	No		og Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolog		Yes	No	Nam	e		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 all		RECORD No	ew Used ermediate, product	ion, etc.		
Purpose of String	Size Hole Drilled	Size Cas Set (In C		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	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage 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 ENH	۶.	Producing N	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
			1							
DISPOSITION OF GAS:			METHOD OF COMPLE			TION:		PRODUCTION INTER	RVAL:	
Vented Sold Used on Lease			Open Hole Perf. Dually (Submit			, Comp. 4C <i>O-5)</i>	Commingled (Submit ACO-4)			
(If vented, Sub	mit ACC	)-18.)		Other (Specify)						



**Oil Well Services, LLC** 

32899 **TICKET NUMBER** LOCATION Otdawa KS FOREMAN Fredmader

# FIELD TICKET & TREATMENT REPORT

r Roberts	NAME & NUM		SECTION	TOV	VNSHIP	RAN	GE	COUNT
	× × KR	5						AND A REAL PROPERTY OF A
			ISW IL		14		22	50
ources Explision	Dev		TRUCK #	DF	RIVER	TRUC	CK #	DRIVE
			506	FRE	EMAD	Sa	Feth	WEG
			368	ARI	. MCD	ARN	MÍ	2
	ZIP CODE		369	DER	emas		1	
K KS	66210		548	KEI	DET	KD		• .
HOLE SIZE	5118	HOLE DEPTH	911	CASIN	SIZE & W		2718	
		TUBING				OTHER		
		WATER gal/sl	k	CEMEN	T LEFT in	CASING	21/2"1	Pluc
DISPLACEMENT SI BODISPLACEMENT PSI								
sh pump r	ate n	nix + Pu,	m 100#	Pven	nom	Geli	Flush	1.
	- 1	50 Poz M				12HP	heno	Soal
	110th She is STATE K KS HOLE SIZE DRILL PIPE SLURRY VOL SLURRY VOL BB DISPLACEMENT Sh Pump r	STATE ZIP CODE K KS 66210 HOLE SIZE 5118 DRILL PIPE SLURRY VOL 4 BB DISPLACEMENT PSI Sh Pump rate Y	110th Ste 500 STATE ZIP CODE K KS 66210 HOLE SIZE 518 HOLE DEPTH DRILL PIPE TUBING SLURRY VOL WATER gal/s SLURRY VOL WATER gal/s SLURRY VOL MIX PSI Sh pump rate Mix + Pu	110th     Ste 500       STATE     ZIP CODE       K     KS       66710       Bob       SLURRY VOL       SLURRY VOL       WATER gal/sk       Sh pump rate       Mix PSI	110th     Ste 500       STATE     ZIP CODE       K     KS       GG210     368       ARI       369     DER       369     DER       369     DER       369     DER       548     KEI       O     HOLE SIZE       578     HOLE DEPTH       911     CASING       O     SLURRY VOL       SLURRY VOL     WATER gal/sk       CEMEN       4     BB DISPLACEMENT PSI       MIX PSI     RATE       Sh Pump rate     Mix + Pump 100 + Pven	110th       Ste 500         STATE       ZIP CODE         K       KS         KS       G6710         G6710       State         MOLE SIZE       5118         HOLE SIZE       5118         KEI DET       911         CASING SIZE & W         Yes       WATER gal/sk         CEMENT LEFT in         MIX PSI       RATE         Yes       Premis         Yes       Premis	110th       Ste 500         STATE       ZIP CODE         K       KS         LKS       66710         STATE       STATE         JOB       JOB         ARLMCD       JRM         STATE       ZIP CODE         K       KS         LKS       66710         State       State         STATE       State         MILL PIPE       TUBING         SLURRY VOL       WATER gal/sk         CEMENT LEFT in CASING         SLURRY VOL       MIX PSI         RATE       YBPM         Sh pump rate       Mix + Pump 100 + Premism Gal	110th       Ste 500         STATE       ZIP CODE         K       KS         LKS       G6710         BOB       BERMAS         DOB       State         Job       Job         AR       MCD         Job       Job         Job       Job         K       KS         KS       G6710         K       KS         Job       G6710         K       KS         MIL BIZE       SURRY MAS         Jor       HOLE SIZE         SLURRY VOL       WATER gal/sk         CEMENT LEFT in CASING       21/2"         GBB DISPLACEMENT PSI       MIX PSI         Sh Pump rate       Mix + Pump 100 + Pvemis m Gol Flush

Za Rubber pluge to casing TD af 5.34 BBL Fresh water. per sack. 700 PSI. Release pressure to set float Value. Pressure Shutin casing. Evans Energy Dev. Lnc. (Kenny) uc ACCOUNT **QUANITY or UNITS DESCRIPTION of SERVICES or PRODUCT UNIT PRICE** TOTAL CODE 97500 5401 PUMP CHARGE 368 5406 90 MILEAGE 368 30mi 120 5402 901 footoge Casily NI 33000 Minimum 5407 Miles. 548 on FO BAL 18000 Zhus Voc Truck 5502C 369 1212 20 1124 116sks 50/50 Poz Mix Coment 11183 Premium Gel 295# 5900 58# 76 Phino Seal 1107A 50 22" Rubber Plugs 5600 4402 2

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avin 3737	•		7.525%	SALES TAX	105 19
avii 3/3/	rV			ESTIMATED	3108 15
	74			DATE	

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.