

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1077040

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:	
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:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	
Operator:	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	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #: Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease 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 Sheets)		Yes]No		g Formatio	n (Top), Depth an	d Datum	Sample	
Samples Sent to Geolog	,	Yes] No	Name	9		Тор	Datum	
Cores Taken Electric Log Run Electric Log Submitted Electronically (If no, Submit Copy)		☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐] No] No] No						
List All E. Logs Run:									
			ASING RE	ECORD Ne		on. etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.	3	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					0e			ement Squeeze Record d of Material Used)	Depth
TUBING RECORD:	Si	ze:	Set At:		Packer	r At:	Liner F	Run:	No	
Date of First, Resumed	Product	ion, SWD or ENH	۶.	Producing M	/lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
									Ι	
DISPOSITION OF GAS:			METHOD OF COMPLE		TION:		PRODUCTION INTER	RVAL:		
Vented Sold Used on Lease				Open Hole	Perf.	Dually (Submit A	Comp. AC <i>O-5)</i>	Commingled (Submit ACO-4)		
(If vented, Submit ACO-18.)				Other (Specify)						

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



CONSOLIDATED Oil Well Services, LLC

TICKET NUMBER	36818	
LOCATION 04ta	va KS	•
FOREMAN Fred	mader	

FIELD TICKET & TREATMENT REPORT

CEMENT

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

1/11/12 2448 Knabe A · KRI-2 SEID 14 22 J CUSTOMER								
CUSTOMER Kansas Resources Expl + Deu. MAILING ADDRESS TRUCK# DRIVER TRUCK# DRIVER 93 93 110 H Safed. May 93 93 110 H State ZIP CODE Ouer and Park KS 66210 Sto FREMAD Safed. May 93 93 110 H State ZIP CODE 370 CASKEN KK Ouer and Park KS 66210 Sto Sto REMARKS: Casing string IPS Job Type Longstring HOLE SIZE # 578 HOLE DEPTH 762 CASING SIZE & WEIGHT 278 EUE Slurry Weight 952' DRILL PIPE TUBING OTHER OTHER Slurry Weight SLURRY VOL WATER gal/sk CEMENT LEFT in CASING 2-25" P/10 DISPLACEMENT 93 70 DISPLACEMENT PSI MIX PSI RATE S BP M REMARKS: Establish pump rate. Mix + Pump 100 # Premi um Gal Fluch. Mix	DATE	CUSTOMER #	WELL NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
CUSTOMER Kousas Resources Expl + Dev. MAILING ADDRESS 93 93 110 ±4 STATE ZIP CODE Over and Park KS blog type blog thm DOB TYPE blog thm TY STATE ZIP CODE Brown K Blog type blog thm DOB TYPE blog thm DOB TYPE blog thm DIOB TYPE blog thm DISPLACEMENT TRUCK # DISPLACEMENT SLURRY VOL WATER gal/sk CEMENT LEFT in CASING DISPLACEMENT Mix PSI REMARKS: Establish pump rate. Mix + Pump cost Premi um	1/11/12	4448	Knabe A . KRI	-2	SE 10	. 14	22	50
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SLURRY WEIGHT			HOLE SIZE 518	HOLE DEPTH	762	CASING SIZE & W	EIGHT 278	EUE
REMARKS: Establish pump rate. Mix + Pump 100 # Premium Gol Fluch. Mix	CASING DEPTH	752'	DRILL PIPE	TUBING			Annual to the second se	
REMARKS: Establish pump rate. Mix + Pump 100 # Premium Gal Fluch. Mix	SLURRY WEIGH	IT	SLURRY VOL	WATER gal/sl	k:	CEMENT LEFT in (CASING 2-2	3"Plugs
	DISPLACEMEN	<u>1</u> <u>4.37</u>	DISPLACEMENT PSI	MIX PSI				
	REMARKS: E	stablish ,	ump rate. Mix	+ Pump	100 # P,	centur Ga	l Fluch.	Mixi
ter unit tot and sold the termine allow a prodo see see .							- ^'	1

Commit to Sulface. Flush Dump Klipps clean. Displace 2-25" rubber Augs to Cosing MD. Pressure to goot PSI. Release pressure to set Float Value. Shut in casing Evans Energy Den Inc. Mader ACCOUNT **QUANITY or UNITS DESCRIPTION of SERVICES or PRODUCT** UNIT PRICE TOTAL CODE 103000 5401 495 PUMP CHARGE 540 0 MILEAGE Truck on bease NIC Casing Footage 752 5402 NIC Ton miles Minimum 5.407 35000 510 80 BBL Vac Truck l'z hr 13500 55020 370 50/50 Por Mix Concent 1124 1095145 283# * Premion Gel 1118B 1107 A ~# 95

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			7.525%	SALES TAX	10383
Ravin 3737				ESTIMATED	200076
	Jatia			TOTAL	L2778 =
AUTHORIZTION	Mary	TITLE		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