

Kansas Corporation Commission Oil & Gas Conservation Division

1085552

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 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? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: 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	Chloride content: ppm Fluid volume: bbls Dewatering method 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 #:	Quarter Sec TwpS. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or 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	
	1085552

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stem time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach com line Logs surveyed. Attach final geological well site report. Drill Stem Tests Taken (Attach Additional Sheets) Samples Sent to Geological Survey Yes No Cores Taken Yes No Electric Log Run Electric Log Submitted Electronically Yes No Electric Log Submitted Electronically	
time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach combine Logs surveyed. Attach final geological well site report. Drill Stem Tests Taken (Attach Additional Sheets) Samples Sent to Geological Survey Yes No Cores Taken Yes No Yes No Yes No Electric Log Run	
(Attach Additional Sheets) Samples Sent to Geological Survey Cores Taken Yes No Electric Log Run Name Top	bottom hole temperature, fluid
Samples Sent to Geological Survey	um Sample
Cores Taken ☐ Yes ☐ No Electric Log Run ☐ Yes ☐ No	Datum
(If no, Submit Copy)	
List All E. Logs Run:	
CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc.	
Purpose of String	Sacks Type and Percent Used Additives
ADDITIONAL CEMENTING / SQUEEZE RECORD	
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone Depth Top Bottom Type of Cement # Sacks Used Type and Percent	Additives
Shots Per Foot PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squee Specify Footage of Each Interval Perforated (Amount and Kind of Material U	
TUBING RECORD: Size: Set At: Packer At: Liner Run:	
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: METHOD OF COMPLETION: PR	ODUCTION INTERVAL:

Lone Jack Oil Company Blue Mound, KS

			7 1-620-363-0492		
Lease:	Rourk	Operator: Jim Ri	ckerson API #:	15-001-303	88-00-00
Contractor:	Lone Jack	Oil Date Started:	<u>6/11/12</u> Date 0	Completed:	6/13/12
Total Depth	n: <u>6</u>	<u>91</u> Well #	<u>5</u> Hole	Size: <u>5</u>	5/8
Surface Pip	e: <u>20'</u>	591 Well # 7" Surface Bit:	9 7/8 Sacks of 0	Cement: <u>5</u>	
Depth of Se	eat Nipple:	Rag	Packer At:		
Length and	Size of Ca	asing: <u>670' 2 3/8</u>		Sacks of Ceme	ent: <u>95</u>
Legal Desc	ription: SE	Rag asing: 670° 2 3/8 E SW NE NE Sec: 30 Twp	: <u>24S</u> Range: <u>19</u>	<u>PE</u> County	: <u>Allen</u>
Inickness	Depth	Type of Formation	Core Thickness	Depth	Time
4		Clay			
37	41	Shale			
44	85	Lime			
5	89	Shale			
1	90	Lime			
37	127	Shale			
11	138	Lime			
35	173	Shale "Black"			
63	236	Lime			
4	240	Shale			
3	243	Lime			
3	246	Shale			
18	264	Lime			
7	271	Shale		and the same of the same state	
4	275	Lime		the street with a first the first the street of the second street of the second street of the second street of	
5	279	Shale			
21	300	Lime			
173	473	Shale			
10	483	Lime			
1	484	Shale			
1	485	Lime			
13	498	Shale		· · · · · · · · · · · · · · · · · · ·	
10	508	Lime			
65	573	Shale			
32	605	Lime			
5	610	Shale			
1	611	Lime			
26	637	Shale			
21	658	Lime			
8	666	Shale			
4	670	Lime			
1	671	Slight Odor			
6	677	Show of Oil "Good Bleed"			
5	682	Oil Sand "Good Bleed"			
9	691	Shale			

691

TD

Lone Jack Oil Company 509 East Walnut Blue Mound, KS 66010

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Date	Invoice #
6/18/2012	1468

Bill To		
Jim Rickerso	n	
Box 3		
Iola, KS 667	49	

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
	Rourk #5 6/13/12, Well #5, circulated 95 sacks of cement to surface pumped 104 gallons of water behind cement and shut in. water truck Sales Tax	700.00 100.00 7.55%	700.007 100.007 60.40
1			
hank you for	your business.	Total	\$860.40

	06/22/20:	12 15:47	62	203	657	789	3					IOS I	NC									PΑ	GΕ	0:
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CONDITIONS Concrete to be define under Trick's own por		1.* RSON DIL CO. BOX 3 & RHODE ISLAND	2889 (DUMP 66749/TO	DRIVERTHUCK	2 -dr 5 .mg	WATER TREM	S/yd 0.0	Excessive Water	GAL)	WENGHMASTER	in the same of the	NOTICE AND BUSHINESS WITH DE COUNTRY WITH DE	X		t. 00	60 °5	200 · 1		TIME ALLOWED	, t	TIME DUE	.	DELAY TIME	
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.902 N. Industrial Rd.	P.O. Box 664 Iola, Kansas 66749 Phone: (620) 365-5588				(0:23:06a)	DATE	36-23-12	TATIEN	Carriers Portland Commit.	Consider New York of Early Children	OCHOTETS & PENSHABE LEWISS No PLANT, ANY CA TREPHONED by the OFFICE The industrial contribes to	ay tuns owat. Alazousoxypiindah.306 Kol Reposite for Rezino Vesial is Delarat.	A \$5 Serice Change and Loss of It. Boose Caley Tica Compat (§ \$50 A R.	QUANTIFY	5.90	£.00			RETURNED TO FLAME	(1.105)	LEFTPLANT	18:36	TOTAL ROUND TRIP	SHR

PAYLESS CONCRETE PRODUCTS,INC. P.O. BOX 664 802 N. INDUSTRIAL RD. IOLA, KS 66749

Voice: 620-365-5588

Fax:

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5,000	10000	Girth.	2.5	With the	W. Company	TAKE THE PERSON NAMED IN

Invoice Number: 31822.

Invoice Date: Jun 13, 2012

Page:

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Duplicate

BIITO:	Ship to:
CASH FOR C.O.D.'S 802 N. INDUSTRIAL RD. IOLA, KS 66749	RANDI OIL P.O. BOX 3 IOLA, KS 66749

	Customer ID	Customer PO	Paymen	Terms
[CASH/C.O.D.	RANDI OIL/ROURK#5	C.O	.D.
	Sales Rep ID	Shipping Method	Ship Date	Due Date
		TRUCK		6/13/12

Quantity Item 95.00 CEMENT/WATER 95.00 MH 1.00 TRUCKING	Description CEMENT & WATER PER BAG MIX MIXING & HAULING TRUCKING CHARGE	Unit Price Amou 5.10 2.50 50.00	484.50 237.50 50.00
		:	
	Subtotal		772.0
Sales Tax			58.29
	Total Invoice Amount		830.29
eck/Credit Memo No:	Payment/Credit Applied TOTAL		