

Kansas Corporation Commission Oil & Gas Conservation Division

1088648

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

Name: Address 1:	OPERATOR: License #	API No. 15
Address 2:	Name:	Spot Description:
City:	Address 1:	SecTwpS. R 🔲 East 🗌 West
Contact Person:	Address 2:	Feet from North / South Line of Section
NR	City:	Feet from _ East / _ West Line of Section
CONTRACTOR: License # County: Name: Wellsite Geologist: Purchaser: Posignate Type of Completion: New Well Re-Entry Workover Gas D&A ENHR SIGW Gas D&A ENHR SIGW Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: feet depth to: w/ sx cmt. If Workover/Re-entry: Old Well Info as follows: Original Comp. Date: Original Total Depth: Conv. to GSW Depening Re-perf. Conv. to GSW Plug Back Total Depth Dual Completion Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: GSW Permit #: County: Permit #: C	Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Lease Name:	Phone: ()	□NE □NW □SE □SW
Wellsite Geologist:	CONTRACTOR: License #	County:
Purchaser:	Name:	Lease Name: Well #:
Designate Type of Completion: New Well Re-Entry Workover Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. If Workover/Re-entry: Old Well Info as follows: Original Comp. Date: Deepening Re-perf. Conv. to ENHR Conv. to GSW Plug Back: Plu	Wellsite Geologist:	Field Name:
New Well	Purchaser:	Producing Formation:
New Well	Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
Oil		, ,
Well Name:	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?
Well Name:Original Total Depth:	Operator:	
Original Comp. Date: Original Total Depth: bbls 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 #: GSW Permit #: Original Total Depth: bbls Chloride content: ppm Fluid volume: bbls Dewatering method used: brail disposal if hauled offsite: Operator Name: License #: Quarter Sec Twp S. R East West County: Permit #:	Well Name:	
GSW Permit #: County: Permit #:	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 #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name: License #:
	Spud Date or Date Reached TD Completion Date or	

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 I II 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 (Attach Additional St	neets)	Yes No		Log	Formation	n (Top), Depth ar	nd Datum	Sample
Samples Sent to Geolo		Yes No		Name			Тор	Datum
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: —— Perforate —— Protect Casing —— Plug Back TD —— Plug Off Zone	Depth Top Bottom ect Casing Back TD Type of Cement Type of Cement		# Sacks Used Type		Type and I	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:

JTC Oil, Inc.

Drillers Log

Well Name ABC # 11

API# 15 15-121-29132-00-00 Cement Amounts

Surface Date 5/28/12 6.5" 20 ft 3 Sacks

Cement Date 6/4/12

Well Depth 398

Casing Depth 386.2

Drillers Log

Faunatian	Drillei	-	Davida
Formation	<u>Depth</u> 13	<u>Formation</u>	<u>Depth</u>
top soil lime			
shale	14		
lime	25 26		
shale			
mix	31		
	50		
lime	55 65		
shale	65		
lime	88		
mix	105		
shale	111		
lime	120		
mix	146		
lime	148		
shale	150		
black shale	151		
lime	153		
shale	178		
black shale	181		
lime	183		
shale	185		
lime	186		
shale	190		
red bed	330		
lime	338		
top oil sand	340-342 10%		
	342-344 10%		
	344-346 80%		
	346-348 80%		
	348-350 35%		
	350-352 38%		
	354-356 80%		
	356-358 50%		

abc #11

358-360 80% 360-362 15% 362-364 lime 362 shale 372 stop drilling 398 casing pipe 386.2



39834 TICKET NUMBER LOCATION OHLOWA K FOREMAN Fred Wa

PO Box 884, Chanute, KS 66720

FIELD TICKET & TREATMENT REPORT

620-431-9210 or 800-467-8676 CEMENT DATE CUSTOMER# WELL NAME & NUMBER SECTION TOWNSHIP RANGE COUNTY 6/4/12 ABC SW 22 me TRUCK # MAILING ADDRESS DRIVER DRIVER TRUCK# 50 G FREMAD Plumcies 495 NARBEC 369 DERMAS KS. 66064 510 SETTUC JOB TYPE hongshin HOLE SIZE 400 **HOLE DEPTH** CASING SIZE & WEIGHT CASING DEPTH_ DRILL PIPE TUBING **SLURRY WEIGHT** SLURRY VOL WATER gal/sk CEMENT LEFT in CASING DISPLACEMENT **WISPLACEMENT PSI** RATE SBPM DUMP ean. Displace

7	TC	Dri	1121
		R/Y	11.0
			11

800

CODE	QUANITY or UNITS	DESCRIPTION of SERVICES	UNIT PRICE	TOTAL	
5401	<u> </u>	PUMP CHARGE	495		1030 00
5406	20mi	MILEAGE	495		80.00
5402	375	Cosing footogo			N/C
5407	& Minimum	Ton Miles	510		116 67
5502C	1 pr	80 BBL Vac Truck	369		900
1126	53 s.Ks	Owe Coment			9964
11188	100*	26 Ptu Puen	Win Cul		2100
4402	1.	22" Pubber Plig			2800
	the second second second		7.55/2005	SALES TAX	7893
ithoriztion -	>0	250335		ESTIMATED TOTAL	244100

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.