

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1088692

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: S	state: Zip:+	Feet from East / West Line of Section
Contact Person:	·	Footages Calculated from Nearest Outside Section Corner:
Phone: ()		
CONTRACTOR: License #		County:
		Lease Name: Well #:
		Field Name:
0		Producing Formation:
Designate Type of Completion:		Elevation: Ground: Kelly Bushing:
	e-Entry Workover	Total Depth: Plug Back Total Depth:
 Oil WSW Gas D&A OG CM (Coal Bed Methane) Cathodic Other (Control of the control of t	SWD SIOW ENHR SIGW GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Fee Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Fee If Alternate II completion, cement circulated from: feet depth to: w/ sx cmt
If Workover/Re-entry: Old Well Ir	nfo as follows:	
Well Name:	Original Total Depth:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume:
Deepening Re-per	f. Conv. to ENHR Conv. to SWD	Dewatering method used:
Plug Back:	Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled	Permit #:	Operator Name:
Dual Completion	Permit #:	License #:
	Permit #:	Quarter Sec TwpS. R East Wes
	Permit #:	County: Permit #:
GSW	Permit #:	
Spud Date or Date Re Recompletion Date	ached 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	1088692
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 Sho	eets)	Yes	No		Lo	g Formatio	n (Top), Depth ar	id Datum	Sample
Samples Sent to Geolog	gical Survey	Yes	No		Name			Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted B (If no, Submit Copy)	Electronically	☐ Yes ☐ Yes ☐ Yes	□ No □ No □ No						
List All E. Logs Run:									
			CASING	RECORD	Nev	v Used			
		Report al	I strings set-c	onductor, surfa	ace, inter	mediate, product	ion, etc.		
Purpose of String	Size Hole Drilled	Size Ca Set (In		Weigh Lbs. / F		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					e	,	Depth		
TUBING RECORD:	NG RECORD: Size: Set At:				Packer	Packer At: Liner Run:				
Date of First, Resumed Pr	oduct	on, SWD or ENH	ર .	Producing N		oing	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours			Gas	as Mcf Wate		ər	Bbls.	Gas-Oil Ratio	Gravity	
									1	
DISPOSITION OF GAS:			METHOD OF COMPLE		TION:		PRODUCTION INTE	RVAL:		
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Submit ACO-18.)			Other (Specify)							

802 N. Industrial Rd. P.O. Box 664 Iola, Kansas 66749 Phone: (620) 365-5588

Payless Concrete Products, T.C.

CONDITIONS Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery at owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request. NOTICE TO OWNER Failure of this contractor to pay those persons supplying material or services to complete this contract.

					which is the subject	of this contract.				
SOLD TO CA001				DR8/30			SHIP TO:			
CASH CUSTOMER										
	BILL TO:P.O. BOX 223 YC,KS									
	DEEL TO: SA H TO RUCK AF N W, HOWRO									
SET HERE N 160										
	W PHST Quail 3/4 5.50									
TIME	FORMULA	LOAD SIZE	YARDS ORDERED		DRIVER/TRUCK		PLANT/TRANSACTION #			
	1 11-1 1	n molecul	for forefore 2	7. LHL	the last	7. HIK	a - a state page rate that			
02:55:58p	A Constant of the second secon	6.50 yd	6.50 yd	0.00	and the	Ø.ØØ	WODCO			
DATE		LOAD #	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER			
an an as	to Date	. Å.	Caulo yu	4 . 200, 5000 (rest. reg.	AND TO BE A REAL OF A					
09-22-11	Today	1	6.50 yd	18530	G/yd -70.0	4.00 in	30242			
	WARNING			MAGE RELEASE		is Detrimental to Concr				
IRRITA	TING TO THE SKIN A	ND EYES	Dear Customer-The driver of this t	O BE MADE INSIDE CURB LINE) ruck in presenting this RELEASE to		ded By Request/Author	ized By			
CAUSE BURNS. Avoid C	nt. Wear Rubber Boots and Gloves. P Contact With Eyes and Prolonged Co	intact With Skin. In Case of	truck may possibly cause damag	inion that the size and weight of his e to the premises and/or adjacent this load where you desire it. It is	GAL X					
Attention. KEEP CHILDR	es, Flush Thoroughly With Water, If Ir EN AWAY.	ritation Persists, Get Medical	our wish to help you in every way the driver is requesting that you s	that we can, but in order to do this ign this RELEASE relieving him and	WEIGHMASTER					
CONCRETE is a PERISHABI	LE COMMODITY and BECOMES the PROP CHANGES OR CANCELLATION of ORIG	ERTY of the PURCHASER UPON	this supplier from any responsibilit	y from any damage that may occur nt property, buildings, sidewalks,						
LEAVING the PLANT. ANY TELEPHONED to the OFFIC	CHANGES OR CANCELLATION of ORIG E BEFORE LOADING STARTS.	NAL INSTRUCTIONS MUST be	driveways, curbs, etc., by the del	ivery of this material, and that you						
The undersigned promises t any sums owed.	to pay all costs, including reasonable attor	neys' fees, incurred in collecting	that he will not litter the public stre tion, the undersigned agrees to inc	eet. Further, as additional considera- lemnify and hold harmless the driver	NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING. NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.					
All accounts not paid within 3	0 days of delivery will bear interest at the rate		of this truck and this supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisin out of delivery of this order. SIGNED							
Not Responsible for Reactive Material is Delivered.	ve Aggregate or Color Quality. No Claim	Allowed Unless Made at Time	arisin out of delivery of this order. SIGNED		LOAD RECEIVED BY:					
A \$25 Service Charge and Excess Delay Time Charged (Loss of the Cash Discount will be collec	ted on all Returned Checks.	X		X					
QUANTITY	CODE	DESCRIPTION				UNIT PRICE	EXTENDED PRICE			
QOANTIT	CODE						EXTENDED PRICE			
6.50	A free loss	WELL (10 S	ACKS PER UNI	T)	6, 50	76.00	494.00			
-2.25	TRUCKING	TRUCKING C	HARGE	. 1/	Con the Con the	50.00	TIE SA			
175			(\land)	1 10/	7		12750			
dire				#21695			111			
1212	- MAE	Rock + Del	ghad Ticket		7	1775/	201.84			
12,15	Ion Crr.	1 COCIL 7 GM	12911111	. T.	/ /	11.05	1 ce al			
RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/C		TIME ALLOWED		858.27			
TETORNED TO FLANT	LEFTJUD	HINISH UNLUADING			TIME ALLOWED G	ubTotal \$	EDE ED			
1-445			1. JOB NOT READY 2. SLOW POUR OR PUMP	 TRUCK BROKE DOWN ACCIDENT 	T	ax % 7.300	il the			
			3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN	8. CITATION 9. OTHER	T	otal \$ 60	100			
LEFT PLANT	ARRIVED JOB	START UNLOADING	5. ADDED WATER		TIME DUE	rder \$ Tals	Constant Constant			
100	51)				1	ADDITIONAL CHARGE 1				
						ABOTTOTAL OTATOL I				
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME			DELAY TIME	ADDITIONAL CHARGE 2				
N754	R						P 92/00-			
1. Y Y I. 11.1	1		A State of the second second		and the second	GRAND TOTAL	101,-1			