

Kansas Corporation Commission Oil & Gas Conservation Division

1088940

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:	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?
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 Twp S. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date 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 Approved by: Date:								

Side Two



Operator Name: _ Lease Name: _ _ Well #: _ 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 Wireline Logs surveyed. Attach final geological well site report. **Drill Stem Tests Taken** Yes No Log Formation (Top), Depth and Datum Sample (Attach Additional Sheets) Name Top Datum Samples Sent to Geological Survey ☐ Yes □ No Cores Taken Yes No Electric Log Run Electric Log Submitted Electronically Yes No (If no, Submit Copy) List All E. Logs Run: CASING RECORD Used New Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight # Sacks Type and Percent Type of Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Additives Depth Cement Used ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth TUBING RECORD: Size: Set At: Packer At: Liner Run: No Yes Producing Method: Date of First, Resumed Production, SWD or ENHR. Pumping Gas Lift Other (Explain) Flowing **Estimated Production** Bbls. Water Bbls. Gas-Oil Ratio Oil Gas Mcf Gravity Per 24 Hours **DISPOSITION OF GAS:** METHOD OF COMPLETION: PRODUCTION INTERVAL: Open Hole Dually Comp. Perf. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)

McGown Drilling, Inc. Mound City, Kansas

Operator:

Mike Becker Stanley, Kansas

Lord #1

Bourbon Co., KS 26-25S-21E

API: 011-23994

Spud Date: Surface Casing:

Surface Length:

Surface Cement:

6/13/2012

7"

21.30'

5 sx

Surface Bit:

Drill Bit:

Longstring:

Longstring Date:

11"

5.875" 858.50'

6/15/2012

Driller's Log

Тор	Bottom	Formation	Comments
0	5	Soil & Clay	
5	22	Lime	
22	48	Sand	
48	130	Lime	
130	134	Bl. Shale	
134	137	Lime	
137	159	Shale	
159	178	Lime	
178	291	Big Shale	
291	292	Lime	
292	298	Shale	
298	299	Lime	
299	316	Shale	
316	319	Lime	
319	383	Shale	
383	424	Lime	
424	468	Shale	
468	484	Lime	20'
484	491	Bl. Shale & S	Shale
491	496	Lime	5'
496	499	Bl. Shale	
499	543	Shale	
543	546	Sand	Grey
546	569	Shale	
569	572	Sand	Hard, grey

913.795.2259 office 620.224.7406 Chris' cell

		Lo	ord #1					
		Bourb	Bourbon Co., KS					
572	587	Shale						
587	588	Lime						
588	590	Shale						
590	592	Bl. Shale						
592	605	Shale						
605	606	Lime	Hard					
606	614	Shale						
614	615	Coal						
615	620	Shale						
620	621	Coal						
621	634	Shale						
634	639	Sand	Oil show					
639	651	Shale						
651	656	Sand	Grey, sandy shall					
656	669	Shale						
669	674	Sandy Shale	Some sand					
674	696	Shale						
696	707	Sand	Odor					
707	708	Coal						
708	734	Shale						
734	737	Sand / Sand	y Shale					
737	760	Shale						
760	761	Coal						
761	786	Shale						
786	791	Sand	Laminated					
791	795	Shale						
795	796	Coal						
796	848	Shale						
848	850	Coal						
850	856	Shale						
856	865	Lime	Mississippian					
865	869	Miss Break	Oil show					
869		TD						



DIEBOLT LUMBER AND SUPPLY INC. 2661 Nebraska Road La Harpe, Kansas 66751

FAX: (620) 496-2226 PHONE: (620) 496-2222

CUST NO: *5

JOB NO: 000

PURCHASE ORDER:

REFERENCE:

CASH/CHECK/BANKCARD

AC

DATE / TIME:

6/18/12

TERMINAL: 552

SOLD TO:

**** CASH ****

TIMBERCREEK ENERGY

SALESPERSON: AC ART CHAPMAN TAX: 001 KANSAS TAX

INVOICE: J34408

LINE	SHIPPED	ORDERED			DESCRIPTION	LOCATION	UNITS	PRICE/ PEF	EXTENSION
1 2	60	60	BG	94PC	94# TYPE I PORTLAND CEMENT	2 2	60	9.65 /BG	579,00 *
3 4	1	1	EA	80	FUEL SURCHARGE DEL TO BRONSON GO SOUTH 4 MILES	S/O	1	10.00 /EA	10.00 *
5 6					ON 5000 ROAD LEFT SIDE OF ROAD. CEMENTING IN WELL	S/O S/O			
				200	913-271-7631 mike Becker				
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** PAID IN FULL **

633.47

TAXABLE NON-TAXABLE SUBTOTAL

589.00 0.00 589.00

BANKCARD PAYMENT

BKCRD# XXXXXXXXXXXXXX6117

633.47

TAX AMOUNT 44.47 TOTAL 633.47

MID: 962000002764

APP: 193354

XR: 934408



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PURCHASE ORDER:

REFERENCE:

CASH/CHECK/BANKCARD

CLERK: AC

DATE / TIME:

6/18/12

9:34

TERMINAL: 552

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