



KANSAS CORPORATION COMMISSION 1089056  
OIL & GAS CONSERVATION DIVISION

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 # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well       Re-Entry       Workover
- Oil       WSW       SWD       SIOW
- Gas       D&A       ENHR       SIGW
- OG       GSW       Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic       Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

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 #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date      Date Reached TD      Completion Date or Recompletion Date

API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_- Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE       NW       SE       SW

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

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: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls

Dewatering method used: \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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: \_\_\_\_\_



1089056

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. 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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

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
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 36143  
LOCATION 180  
FOREMAN Larry Horn

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT** API-11-155-21590-

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-14-12	4403	Caemichael A2	10	243	4W	Revo
CUSTOMER			TRUCK #			
Kawtor Oil			539	LARRY		
MAILING ADDRESS			DRIVER			
15 W 6th St Ste 2601			603	JEFF		
CITY	STATE	ZIP CODE	TRUCK #			
Tulsa	OK	74119	491	JOE-Josh		

JOB TYPE Prod B HOLE SIZE 118 HOLE DEPTH 4250 CASING SIZE & WEIGHT 3 1/2  
 CASING DEPTH 3925 KB DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER Log 3914 KB  
 SLURRY WEIGHT 14.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 93.15 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Reamed into 5 1/2" Cas - Plug Part hole to surface with 1" Spuds -  
Shut at 975 lbs - Pumped 500 lbs Freshwater 1200 lbs Mud & Fresh  
500 lbs Water - 200 lbs #1 - Filtered Pumped 1000 lbs Displaced,  
Plus Washwater Displacement # 850 - 12000 plug at 1250 lbs  
At 93.6 lbs - Rechecked Flow hole

Art hole - 25 sks  
Mud hole 15 sks

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	23	MILEAGE	4.00	212.00
5402	1425	Footage	1.22	312.50
1126A	240	2ks Thickset	19.20	4608.00
1110 A	1200	1kg Gal-seal	.46	552.00
1144 G	500	gal MudKush	1.05	525.00
5407A	53	Bulk Delivery @ 13.2	1.24	937.46
4253	1	2 1/2 Type A Anchor Shole	1584.00	1584.00
4454	1	5 1/2 latch down Plug	254.00	254.00
4104	5	5 1/2 Cement Brackets	229.00	1145.00
4130	12	3 1/2 Centralizer	48.00	576.00
Subtotal				11736.96
SALES TAX				674.82
ESTIMATED				
TOTAL				12411.78

Form 3767

AUTHORIZATION [Signature] TITLE 250671 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





**TRILOBITE TESTING, INC.**

# DRILL STEM TEST REPORT

Kantor Oil Co  
 15 W 6th St STE 2601  
 Tulsa, OK 74119  
 PO Box 525  
 ATTN: Terry McLeod

**10-24S-4W Reno**

**Carmichael A2**

Job Ticket: 47496 **DST#: 1**  
 Test Start: 2012.06.10 @ 14:13:41

## GENERAL INFORMATION:

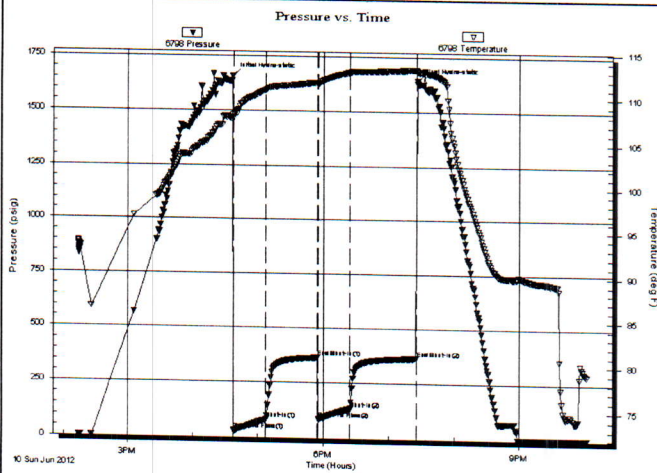
Formation: **Mississippi**  
 Deviated: No Whipstock: ft (KB)  
 Time Tool Opened: 16:37:41  
 Time Test Ended: 22:02:26  
 Interval: **3317.00 ft (KB) To 3350.00 ft (KB) (TVD)**  
 Total Depth: 3350.00 ft (KB) (TVD)  
 Hole Diameter: 7.88 inches Hole Condition: Good  
 Test Type: Conventional Bottom Hole (Initial)  
 Tester: Leal Cason  
 Unit No: 45  
 Reference Elevations: 1486.00 ft (KB)  
 1476.00 ft (CF)  
 KB to GR/CF: 10.00 ft

## Serial #: 6798

Inside

Press@RunDepth: 134.74 psig @ 3318.00 ft (KB)  
 Start Date: 2012.06.10 End Date: 2012.06.10  
 Start Time: 14:13:41 End Time: 22:02:26  
 Capacity: 8000.00 psig  
 Last Calib.: 2012.06.10  
 Time On Btm: 2012.06.10 @ 16:37:11  
 Time Off Btm: 2012.06.10 @ 19:26:41

TEST COMMENT: IF: Fair Blow, BOB in 9 minutes  
 ISI: Surface Blow Back  
 FF: Fair Blow, BOB in 10 minutes  
 FSI: Surface Blow Back



## PRESSURE SUMMARY

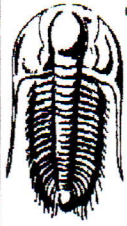
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1658.24	107.96	Initial Hydro-static
1	31.87	107.63	Open To Flow(1)
31	81.85	110.81	Shut-In(1)
78	365.08	111.72	End Shut-In(1)
78	85.32	111.61	Open To Flow(2)
108	134.74	112.89	Shut-In(2)
169	365.51	113.22	End Shut-In(2)
170	1640.17	113.04	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
0.00	GIP 120	0.00
124.00	WCM 40%W 60%M	1.74
62.00	GOWCM 10%G 5%O 35%W 50%M	0.87
134.00	GOWCM 30%G 15%O 15%W 40%M	1.88

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

Kantor Oil Co

**10-24S-4W Reno**

PO Box 525  
Burrton, KS 67020

**Carmichael A2**

Job Ticket: 47497

**DST#: 2**

ATTN: Terry McLeod

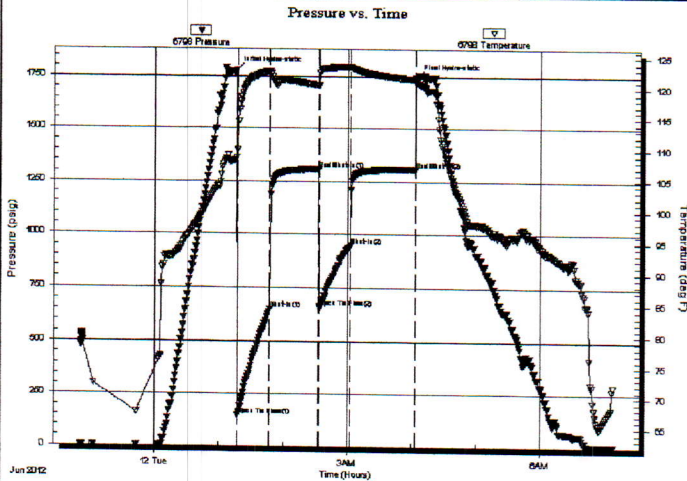
Test Start: 2012.06.11 @ 22:51:05

## GENERAL INFORMATION:

Formation: **Hunton**  
 Deviated: **No Whipstock:** ft (KB)  
 Time Tool Opened: **01:17:35**  
 Time Test Ended: **07:07:35**  
 Interval: **3533.00 ft (KB) To 3678.00 ft (KB) (TVD)**  
 Total Depth: **3678.00 ft (KB) (TVD)**  
 Hole Diameter: **7.88 inches** Hole Condition: **Good**  
 Test Type: **Conventional Bottom Hole (Reset)**  
 Tester: **Leal Cason**  
 Unit No: **45**  
 Reference Elevations: **1486.00 ft (KB)**  
**1476.00 ft (CF)**  
**KB to GR/CF: 10.00 ft**

**Serial #: 6798** Inside  
 Press@RunDepth: **947.27 psig @ 3534.00 ft (KB)**  
 Start Date: **2012.06.11** End Date: **2012.06.12** Capacity: **8000.00 psig**  
 Start Time: **22:51:05** End Time: **07:07:35** Last Calib.: **2012.06.12**  
 Time On Btm: **2012.06.12 @ 01:16:35**  
 Time Off Btm: **2012.06.12 @ 04:03:50**

TEST COMMENT: IF: Strong Blow, BOB in 2 minutes  
 IS: No Blow Back  
 FF: Strong Blow, BOB in 3 minutes  
 FS: No Blow Back



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1776.86	108.59	Initial Hydro-static
1	144.84	109.90	Open To Flow (1)
31	649.97	122.77	Shut-In(1)
77	1307.13	120.58	End Shut-In(1)
77	661.65	120.44	Open To Flow (2)
107	947.27	123.48	Shut-In(2)
167	1307.91	121.56	End Shut-In(2)
168	1746.60	121.80	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
1550.00	Water	21.74
620.00	M CW 50% M 50% W	8.70
186.00	W CM 30% W 70% M	2.61

\* Recovery from multiple tests

## Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)