1090967

KANSAS CORPORATION COMMISSION
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 # 4567
Name: D. E. Exploration, Inc.
Address 1: PO BOX 128
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 0128
Contact Person: Phil Frick
Phone: (785) 883-4057
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: None
Purchaser:

Designate Type of Completion:

- [x] New Well
- [ ] Re-Entry
- [ ] Workover

- [ ] Oil
- [ ] WSW
- [ ] SWD
- [ ] SIOW
- [ ] Gas
- [ ] D&A
- [x] 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 #:

06/29/2012	07/02/2012	07/02/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-121-29194-00-00
Spot Description:
SW-NE-NE-NW Sec. 4 Twp. 19 S. R. 24 [x] East [ ] West
4740 Feet from [ ] North / [x] South Line of Section
3085 Feet from [x] East / [ ] West Line of Section

Footages Calculated from Nearest Outside Section Corner:
[ ] NE [ ] NW [x] SE [ ] SW

County: Miami
Lease Name: Garberg Well #: AI-109
Field Name: BLACK
Producing Formation: WAYSIDE
Elevation: Ground: 817 Kelly Bushing: 817
Total Depth: 279 Plug Back Total Depth: 218
Amount of Surface Pipe Set and Cemented at: 21 Feet
Multiple Stage Cementing Collar Used? [ ] Yes [x] No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 247
feet depth to: 0 w/ 36 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 20 bbls
Dewatering method used: Evaporated

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:**
- [x] **Wireline Log Received**
- [ ] **Geologist Report Received**
- [x] **UIC Distribution**

ALT [ ] I [x] II [ ] III **Approved by:** Deanna Garrisor **Date:** 08/22/2012

Side Two

1090967

Operator Name: D. E. Exploration, Inc. Lease Name: Garberg Well #: AI-109

Sec. 4 Twp. 19 S. R. 24 ☑ East ☐ West County: Miami

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 ☐ Yes ☑ No
(Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☑ No

Cores Taken ☐ Yes ☑ No

Electric Log Run ☑ Yes ☐ No

Electric Log Submitted Electronically ☑ Yes ☐ No
(If no, Submit Copy)

List All E. Logs Run:

Gamma Ray/Neutron/CCL

☑ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
WAYSIDE	170	+647

CASING RECORD ☐ New ☑ 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
SURFACE	9.875	7	20	21	PORTLAND	3	NA
PRODUCTION	5.625	2.875	6	247	50/50 POZ	36	SEE TICKET

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 *(Amount and Kind of Material Used)*	Depth
3	170-180 - 31 PERFS - 2" DML RTG		

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

DISPOSITION OF GAS:
☐ Vented ☐ Sold ☐ Used on Lease
(If vented, Submit ACO-18.)

METHOD OF COMPLETION:
☐ Open Hole ☑ Perf. ☐ Dually Comp. *(Submit ACO-5)* ☐ Commingled *(Submit ACO-4)*
☐ Other *(Specify)*

PRODUCTION INTERVAL:

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Miami County, KS
Well: Garberg AI-109
Lease Owner: DE Exploration

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
6/29/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
4	Soil-Clay	4
164	Shale	168
3	Sand	171
9	Sand	180
5	Sand	188
15	Sand & Lime	200
6	Sandy Lime	206
5	Shale	211
5	Lime	216
21	Shale	237
8	Lime	245
16	Shale	261
4	Lime	265
14	Shale	279-TD

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals D^2x.14xh

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

* D - Diameter of Pump Sheave
* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - RPMxd over SPMxR

d - SPMxRxD over RPM

SPM - RPMXD over RxD

R - RPMXD over SPMxD

BELT LENGTH - $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS: $\frac{\text{WATTS}}{\text{VOLTS}}$ = AMPS

746 WATTS equal 1 HP

Log Book

Well No. A1-109

Farm Bambers

KS (State) Miami (County)

4 (Section) 19 (Township) 24 (Range)

For DF Exploration (Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Garbers Farm: Miami County

KS State; Well No. A1-109

Elevation 818

Commenced Spuding 6-29 2012

Finished Drilling 7-2 2012

Driller's Name Chad Weaver

Driller's Name

Driller's Name

Tool Dresser's Name Brandon Stone

Tool Dresser's Name

Tool Dresser's Name

Contractor's Name TOS

4 19 24

(Section) (Township) (Range)

Distance from S line, 4815 ft.

Distance from E line, 3085 ft.

9978 - 9983 5hrs

3-sack

CASING AND TUBING RECORD

10" Set		10" Pulled	
8" Set	21'	8" Pulled	
6¼" Set		6¼" Pulled	
4" Set		4" Pulled	
2⅞ Set	246.8	2" Pulled	

218.1 Baffle

279 TD

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
246	8	TP			
218	1	Baffle			

Thickness of Strata	Formation	Total Depth	Remarks
4	soil & clay	4	
164	shale	168	some Lime seams
3	sand	171	10% odor, ok bleed
9	sand	180	50% - 60%
5	sand	185	no oil
15	shale & Lime	200	
6	sandy Lime	206	10% oil
5	shale	211	
5	Lime	216	
21	shale	237	
8	Lime	245	
16	shale	261	
4	Lime	265	
14	shale	279	TD

CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 251103

Invoice Date: 07/11/2012 Terms: 0/0/30,n/30 Page 1

D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092
(785)883-4057

GARBERG AI-109
37354
4-19-24
07-02-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	36.00	10.9500	394.20
1118B	PREMIUM GEL / BENTONITE	160.00	.2100	33.60
1111	SODIUM CHLORIDE (GRANULA	70.00	.3700	25.90
1110A	KOL SEAL (50# BAG)	180.00	.4600	82.80
1401	HE 100 POLYMER	.50	47.2500	23.63
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

	Description	Hours	Unit Price	Total
368	CEMENT PUMP	1.00	1030.00	1030.00
368	EQUIPMENT MILEAGE (ONE WAY)	40.00	4.00	160.00
368	CASING FOOTAGE	246.00	.00	.00
370	80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00
510	MIN. BULK DELIVERY	1.00	350.00	350.00

Parts:	588.13	Freight:	.00	Tax:	44.40	AR	2397.53
Labor:	.00	Misc:	.00	Total:	2397.53		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 37354
LOCATION Ottawa
FOREMAN Alan Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-2-12	2355	Garber AI-109	NW 4	19	24	Mi

CUSTOMER: D.E. Exploration
MAILING ADDRESS: P.O. Box 128
CITY: Wellsville | STATE: KS | ZIP CODE: 66092

TRUCK #	DRIVER	TRUCK #	DRIVER
516	Ala Mad	Safety	Meet
368	Arl McD	ABM	
370	Kei Car	KC	
510	Ryasin	RS	

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 279 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 246 DRILL PIPE TUBING OTHER baffle 218
SLURRY WEIGHT SLURRY VOL WATER gal/sk CEMENT LEFT in CASING yes
DISPLACEMENT 1.25 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Established rate. Mixed & pumped 1/2 gal polymer followed by 100# gel. Mixed & pumped 36 sk 50/50 cement plus 5# Kolseal 5% salt 2% gel. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PSI. Set float. Closed valve.

TOS. Chad.

Alan Mader

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	40	MILEAGE		160.00
5402	246'	casing footage		—
5407	Min	ton miles		350.00
5502C	2 1/2	80 vac		225.00
1124	36 sk	50/50 cem		394.20
1118B	160#	gel		33.60
1111	70#	salt		25.90
1110A	180#	Kolseal		32.80
1401	1/2	polymer		23.63
4402	1	2 1/2 plug		28.00
			SALES TAX	44.40
			ESTIMATED TOTAL	2397.53

completed

Ravin 3737

No company rep

AUTHORIZTION Jim Okid TITLE 251103 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.