

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1092552

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 North / South Line of Section
City: State: Zip:+	Feet from Cast / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
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:
	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? Yes No
GGW GGW Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to:w/sx cmt.
	Drilling Fluid Management Plan
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: ppm Fluid volume: bbls
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Dewatering method used:
Conv. to GSW Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec TwpS. R East West
GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date 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 I II Approved by: Date:

	Side Two	
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 She	eets)	Yes I	ю	Lo Nam	-	n (Top), Depth and		Sample Datum
Samples Sent to Geolog	gical Survey	Yes I	No	Nam	e		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	Yes IN Yes IN Yes IN	No					
List All E. Logs Run:								
			SING RECORD					
		Report all string	s set-conductor,	surface, inte	rmediate, producti	on, etc.		-
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)		eight s. / Ft.	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 Specify For	RECOF	RD - Bridge P Each Interval	Plugs Set/Typ Perforated	e			ement Squeeze Record of Material Used)	Depth
TUBING RECORD:	Siz	e:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed	Producti	on, SWD or ENHF	ξ.	Producing N	/lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
									1	
DISPOSITI	ON OF G	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION IN	TERVAL:
Vented Solo		Jsed on Lease		Open Hole	Perf.	Uually (Submit)	Comp. 4CO-5)	Commingled (Submit ACO-4)		
(If vented, Su	bmit ACO	-18.)		Other (Specify)						

R.J. Enterprise 22082 NE Neosho RD Garnett, KS 66032

Stewart 3-I

Start 7-16-2016

3	soil	3	F
14	sand/stone	17	
128	lime	145	
172	shale	317	
24	lime	341	
69	shale	410	
29	lime	439	
42	shale	481	S
19	lime	500	ra
7	shale	507	С
5	lime	512	
97	shale	609	
3	lime	612	
63	shale	675	
3	sandy shale	678	
4	sandy shale	682	odor
12	Bkn sand	694	good show
4	sandy shale	698	good show
3	sandy shale	701	show
3	Dk sand	704	show
28	Shale	732	T.D.

Finish 7-17-2012

set 20' 7" ran 726.4' 2 7/8 cemented to surface 66 sxs

2 m 2				č.	EXTENSION	870.00 1964,00	\$5124.60	399.72	\$5624.32
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GARNETT TRUE VALUE HOMECENTER 410 N Maple (785) 448-7106 FAX (785) 448-7135		Acct typ codes:	and Ter RODER KENT (785) 449-5955 NOT FOR HOUSE USE (785) 449-5955	Oustamer PO:	DEBORIFTION	PORTLAND CEMENT-444	CHECKED BY DATE SHIPPED DRIVER	A NUDERSON COUNTY - RECEVED COMPLETE AND IN 0000 CONDITION NOT-13 Tax #	
GARNETT TRU (785) 448-7	Page: 1	Special : Instructions : Bais np e: MIKE	sola Ta: POGER KENT 22002 NH NEOSHO RD QANNETT, K8 6003	Customer et: 0000357	BHIP ILI UNI I ITEM#	4 7 7 2 8 2 9 2 9 2 9 2 9 2 9 2 9 2 9 2 9 2 9 2 9		hy diffe	
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GARNETT TRUE VALUE HOMECENTER 410 Maple Gamet, KS 86032 (785) 448-7105 FAX (785) 448-7135 T135007 MART (785) 448-7135	Invola		IN NOT FOR HOUSE US	(798) 440-6965 Customer PCi	boousil.			ame Pick up constant angle concentricity Travable 12.98 North matches 0.00 Entere text	