



KANSAS CORPORATION COMMISSION 1095003
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: _____



1095003

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 39554

LOCATION Ottawa KS

FOREMAN Fred Mader

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/28/12	4015	ABC # P-32	SW 22	17	22	MI
CUSTOMER			TRUCK # DRIVER TRUCK # DRIVER			
JTC Oil Inc			506	Fred Mad	Safety	Nady
MAILING ADDRESS			495	Har Bec	HB	
35688 Plum Creek Rd			675	Keibet	KD	
CITY	STATE	ZIP CODE	548	Milk Ha	MA	
Oswatomia	KS	66064				
JOB TYPE <u>Long string</u>	HOLE SIZE <u>6"</u>	HOLE DEPTH <u>437</u>	CASING SIZE & WEIGHT <u>2 7/8 EUE</u>			
CASING DEPTH <u>418'</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>2 1/2" Plug</u>			
DISPLACEMENT <u>2.73 BBL</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>4 BPM</u>			

REMARKS: Establish pump rate. Mix Pump 100* Gal Flush. Mix Pump
51 SKS OWC Cement. Cement to Surface. Flush pump & lines
clean. Displace 2 1/2" Plug to casing TD. Pressure to 700 PSI
Release pressure to set float valve. Shut in casing

Fred Mader

JTC Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	25 mi	MILEAGE	495	100 ⁰⁰
5402	418	Casing Footage		NK
5407	1/3 minimum	Ten Miles	548	116 ⁶⁷
5502C	1 1/2 hr	80 BBL Vac Truck	675	135 ⁰⁰
1126	51 SKS	OWC Cement		958 ⁸⁰
1115B	100 #	Premium Gel		21 ⁰⁰
4402	1	2 1/2" Rubber Plug		28 ⁰⁰
1107	13 #	Flo Seal		30 ⁵⁵
			705 ²⁰	SALES TAX
				ESTIMATED TOTAL
				2498 ⁴²

Ravin 3737

AUTHORIZATION *Davis Budd* TITLE _____ 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

292441

DRILL LOG

Operator License# _____

API 15-121-29256-00-00

Operator _____

Lease Name ABC

Address _____

Well # 32

Contractor JTC Oil, Inc.

Spud Date 8/21/12 Cement 8/28/12

Contractor License__32834
of _____

Location _____

T.D. 437 T.D. of Pipe 417.5 _____ feet from

Surf. Pipe Size 6.5 Depth 20 _____ feet from _____

Kind of Well _____

County Miami

Thickness	Strata	From	To	Thickness	Strata	From	To
12	clay/soil	0	12	23	shale	61	84
2	shale	12	14	5	lime	84	89
16	lime	14	30	6	shale	89	95
2	shale	30	32	15	lime	95	110
3	lime	32	35	10	shale	110	120
7	shale	35	42	25	lime	120	145
3	lime	42	45	6	black shale	145	151
4	shale	45	49	1	lime	151	152
1	lime	49	50	3	shale	152	155
5	shale	50	55	21	lime	155	176

6	lime	55	61	6	black shale	176	182
				13	lime	182	185
				4	shale	185	189
				4	lime	189	193
				5	shale	193	198
				2	lime	198	200
				122	shale	200	322
				2	lime	322	324
				10	shale	324	334
				1	lime	334	335
				2	shale	335	337
				3	red bed	337	339
				2	little sand	339	341
				2	little	341	343
				2	little lime	343	345
				2	better	345	347
				2	mostly lime	347	349
				2	good	349	351
				2	vgood	351	353
				2	vgood	353	355
				2	vgood	355	357
				2	vgood	357	359
				2	vgood	359	361

2	good	361	363
2	no sand	363	365
8	lime	365	373
55	shale	373	428
9	lime	428	437
