



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1092599  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

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
- Plug Back       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

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

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

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

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

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

Total Vertical 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1092599

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

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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  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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Clark, Donald C. dba CFA Oil Company
Well Name	DOWNEY RANCH INC. 2
Doc ID	1092599

All Electric Logs Run

Please Hold All Logs Confidentially
Gamma Ray Neutron
Dual Compensated Porosity
Computer Processed Interpretation
Please Hold All Logs Confidentially

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2078  
Wichita, KS 67202-3802



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Mark Sievers, Chairman  
Thomas E. Wright, Commissioner

Sam Brownback, Governor

September 04, 2012

Donald C. Clark  
Clark, Donald C. dba CFA Oil Company  
PO BOX 252  
BONNER SPGS, KS 66012-0252

Re: ACO1  
API 15-161-20079-00-00  
DOWNEY RANCH INC. 2  
NW/4 Sec.29-10S-09E  
Riley County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,  
Donald C. Clark

Downey Ranch #2

Riley County

T.D. at 1620' 7 7/8" Hole, 180' of 8 5/8" S/P

1616' > Spot 35 SKs. 60/40 Pozmix cement w/ 4% Gel + 2 1/2% CAC

Gel Spacer > used 1400 lbs Gel w/ 60 Bbls water

249' > Cement Solid from 249' To Surface  
mixed w/ 12 1/2 Bbls = 75 SKs 60/40 Pozmix 4% Gel

Hurricane Services

Cement Ticket # 100148

Plug on 8-31-12

# Statement

HURRICANE SERVICES, INC.  
250 N. WATER, SUITE #200  
WICHITA, KS 67202  
(316) 303-9515

Statement Date

08/31/2012

CFA OIL COMPANY  
PO BOX 252  
BONNER SPRINGS, KS 66012

Date	Reference	Description	Charge	Credit	Balance
8/31/2012	0007892-IN		1,945.47		1,945.47
8/31/2012	0007900-IN		5,445.16		5,445.16

Total: 7,390.63

Current	30 Days	60 Days	90 Days	120 Days	Balance Due
7,390.63	0.00	0.00	0.00	0.00	7,390.63

**Hurricane Services, Inc.**  
**Cementing & Circulating Division**  
**250 N. Water, Suite 200**  
**Wichita, KS 67202**

FED ID # 48-1214033  
 Shop # (620) 437-2661  
 Cellular # (620) 437-7582  
 Office # (316) 303-9515  
 Office Fax # (316) 263-0432  
 MC ID# 165290

Shop Address: 3613A Y Road  
 Madison, KS 66860

Customer:  
 CFA OIL COMPANY  
 PO BOX 252  
 BONNER SPRINGS, KS 66012

Invoice Date: 8/31/2012  
 Invoice #: 0007900  
 Lease Name: DOWNEY RANCH  
 Well #: 2  
 County: RILEY

Date/Description	HRS/QTY	Rate	Total
8/31/12 - See attached work ticket #100148 of BB	1.00	790.00	790.00
Pump truck mileage one way #201	80.00	3.25	260.00
60/40 Pozmix cement	117.00	10.90	1,275.30 T
Gel 4%	402.00	0.30	120.60 T
Calz	80.00	0.75	60.00 T
Gel spacers between plugs	1,400.00	0.30	420.00 T
Water transport	7.50	105.00	787.50
City water charge	4,200.00	0.01	54.60 T
Trucking charge tubing	7.00	95.00	665.00
Bulk truck #202	5.23	92.00	481.16
Pickup truck mileage one way #290	80.00	1.50	120.00
5% Fuel surcharge	1.00	251.70	251.70 T

Net Invoice 5,285.86  
 Sales Tax: (7.30%) 159.30  
**Total 5,445.16**

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

**WE APPRECIATE YOUR BUSINESS!**



Hurricane Services, Inc.  
 3613 A Y Road  
 Madison, KS 66860  
 Office # 620-437-2661  
 Brad Cell # 620-437-6765

Ticket Number 100148  
 Location Madison  
 Foreman Brad Butts

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
8-31-12		Downey Ranch * 2	29-10s-9E	Riley
Customer <u>Donald C. Clark</u> <u>dba CFA Oil Company</u>		Mailing Address	City	State Zip

Job Type: <u>Plug To Abandon</u>	Truck #	Driver
Hole Size: <u>7 7/8"</u>	<u>201</u>	<u>Kelly</u>
Hole Depth: <u>1620'</u>	<u>202</u>	<u>Jerry</u>
Bridge Plug:	<u>144 = 152</u>	<u>Rick</u>
Packer:	<u>142 = 756</u>	<u>Cody</u>

Quantity Or Units	Description of Services or Product	Pump charge	
80	Mileage	\$3.25/Mile	790.00 260.00
117 SACKS	60/40 Pozmix cement	10.90	1275.30
402 lbs.	Gel 42	.30	120.60
80 lbs.	CALZ > mixed w/ 35SKs cement on bottom	.75	60.00
1400 lbs.	Gel > Spacer between cement plugs	.30	420.00
7.5 Hrs.	WATER Transport	105.00	787.50
4200 Gals.	City water	13.00 / 1000	54.60
7 Hrs.	Trucking charge - Tubing	95.00	665.00
5.23 Tons	Bulk Truck	\$1.15/Mile	481.16
80 miles	Truck #290	1.50	120.00
	Plugs		
	Subtotal		5034.16
	Sales Tax		140.93
	Estimated Total		5175.09

Remarks: Rig up to 2 7/8" tubing set at 1616', Break circulation with water. Gel hole with 1400 lbs. Gel with 60 Bbls. water, followed with water spacer - Spot 35 SKs cement w/ 2 1/2% CALZ.  
 Pull tubing up to 249', Rig up to tubing - Break circulation, circulate hole clean.  
 Mixed cement till we had good cement returns, pull tubing out of hole - fill hole backup with cement.  
 Job complete - Tear down

35 SKs @ 1616'  
 82 SKs @ 249' To Surface

Witnessed by Don  
 Customer Signature



FED ID # 48-1214033  
Shop # (620) 437-2661  
Shop Fax # (620) 437-2881  
Office # (316) 303-9515  
Office Fax # (316) 263-0432

**Hurricane Services, Inc.**  
**Well Servicing Division**  
250 N. Water, Suite 200  
Wichita, KS 67202

MC ID# 165290

Shop Address: 3613A Y Road  
Madison, KS 66860

Customer:  
CFA OIL COMPANY  
PO BOX 252  
BONNER SPRINGS, KS 66012

Invoice Date: 8/31/2012  
Invoice #: 0007892  
Lease Name: DOWNEY

Well #: 2

County: RILEY

Date/Description	HRS/QTY	Rate	Total
8/31/12 - See attached work ticket #28978 of Rig #6	7.00	150.00	1,050.00
Power tongs	2.00	37.00	74.00
Thread lube	1.00	21.00	21.00
2 3/8" Work string	1,616.00	0.36	581.76
5% Fuel surcharge	1.00	86.35	86.35

Net Invoice 1,813.11  
Sales Tax: (7.30%) 132.36  
**Total** 1,945.47

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

**WE APPRECIATE YOUR BUSINESS!**



HURRICANE SERVICES, INC.  
WELL SERVICE DIVISION

TICKET # 28978

KCC Operator # 34059

Date: 8-31-2012 Rig # 706 CO. Ry

Operator Bryan Swagar

Company CFA Oil

Roust Travis Spires

Lease Downey

Roust Jeff Scriener

Time Out 7:00 AM On 9:00 AM

Well # 2 Old X New

Off 12:00pm In 2:00pm

Diameter Quantity 7 hrs

Sucker Rods						
Rod Subs		2'	4'	6'	8'	10'
Pump Data		Size: 1 1/4" 1 1/2" 1 3/4" 1 25/32" 2" 2 1/4" Other:				Type: Insert / Tubing
(One Circle)		Plunger: Cup Rings SPMTL BBL Length:				
Gas Anchor		Strainer:				Size of G.A.
<u>2 3/4"</u>	<u>44</u>	Tubing		Size: <u>2 3/8"</u> Thread: <u>8 rod upset</u> #Jts:		
Tubing Subs		2'	4'	6'	8'	10'
Working Barrel		Size:		Length:	Set @:	
Mud Anchor		Plugged or Open:		Length:	Size:	
Seating Nipple				Length:	Size:	
Packer/Anchor		Type:		Size:	Set @:	
Polish Rod		Length:		Diameter:		
Polish Rod Liner		Length:		Diameter:	Type:	

\*\*\*\*\*Indicate if what was ran in hole is different than what was removed\*\*\*\*\*

Rod Break:	# Down:	Body:	Box:	Other:
Tbg Leak:	# Down:	Split:	Hole:	Collar Leak:
Scale:	Pitting:	Corrosion:	Misc:	

Tubing # of Trips 2

Y / N	Motel and Per Diem: # of Nights	# of Men	Y / N	Rod Fishing Tool Per Use
<input checked="" type="checkbox"/>	Tongs - Trips: <u>2</u>	<input checked="" type="checkbox"/>	Casing Tongs - Trips:	<input checked="" type="checkbox"/> Pressure Tester
<input checked="" type="checkbox"/>	Paint	<input checked="" type="checkbox"/>	Wash Head & Stripping Rubber	<input checked="" type="checkbox"/> Handling Sub for Drill Collars
<input checked="" type="checkbox"/>	Tubing Lube - Trips: <u>1</u>	<input checked="" type="checkbox"/>	Chicksan and Hoses Per Well	<input checked="" type="checkbox"/> Wedding Band
<input checked="" type="checkbox"/>	Weight Indicator Per Well	<input checked="" type="checkbox"/>	Standpipe and Kelly Hose Per Well	<input checked="" type="checkbox"/> Bumper Sub 3 1/8"
<input checked="" type="checkbox"/>	Depthometer Per Well	<input checked="" type="checkbox"/>	Impression Block Per Well	<input checked="" type="checkbox"/> Carbide 5 1/2" Taper Per Well
<input checked="" type="checkbox"/>	Casing Swab Jars/Equipment	<input checked="" type="checkbox"/>	Mud Mixing Tank Per Day	<input checked="" type="checkbox"/> Carbide 5 1/2" Flat Per Well
<input checked="" type="checkbox"/>	Tubing Swab Jars Per Well	<input checked="" type="checkbox"/>	5 1/2" Scraper Per Well	<input checked="" type="checkbox"/> 7" Scraper Per Well
<input checked="" type="checkbox"/>	Oil Saver	<input checked="" type="checkbox"/>	4 1/2" Scraper Per Well	<input checked="" type="checkbox"/> New 6 1/4"
Qty:	Oil Saver Rubber (Extra)	<input checked="" type="checkbox"/>	Carbide 4 1/2" Tapered Per Well	<input checked="" type="checkbox"/> Used 6 1/4"
Qty:	Swab Cups: 5 1/2" 4 1/2" 2 7/8" 2 3/8"	<input checked="" type="checkbox"/>	Carbide 4 1/2" Flat Per Well	<input checked="" type="checkbox"/> Power Swivel
<input checked="" type="checkbox"/>	Sand Pumps	<input checked="" type="checkbox"/>	3 1/8" Drill Collars - Qty:	<input checked="" type="checkbox"/> Pipe Trailer
<input checked="" type="checkbox"/>	Bailer Per Well	<input checked="" type="checkbox"/>	Extra Wash Head Rubber-Qty:	<input checked="" type="checkbox"/> Turn Table - Hours:
<input checked="" type="checkbox"/>	Sand Hog Bailer Per Well	<input checked="" type="checkbox"/>	New Bit: 3 3/4" 3 7/8" 4 3/4" 4 7/8" Per Well	
<input checked="" type="checkbox"/>	100 BBL Swab Tank	<input checked="" type="checkbox"/>	Used Bit: 3 3/4" 3 7/8" 4 3/4" 4 7/8" Per Well	

Remarks: Drove to location, had safety meeting. Rigged up for tubing. Talled and tripped in with 52 joints @ 1616'. Wait for Brad to cement bottom plug. Tripped out with 49 joints @ 249'. Wait for Brad to cement top plug. Tripped out with tubing. Cleaned location. Rigged down drove to shop.

(2 3/8" OUC WORKSTRING) 1616'



**Hurricane Services, Inc.**  
**P.O. Box 782228**  
**Wichita, KS 67278-2228**

Company: CFA oil Date: 8-31-2012

Well Name: Downey #2 Sec. T R

Tubing Size: \_\_\_\_\_ Csg. Size: \_\_\_\_\_ Perfs: \_\_\_\_\_

B-Plug: 1620 Packer Setting: \_\_\_\_\_

FED ID # 48-1214033 Office # 316 685-5908  
 Shop # 620 437-2661 Office Fax # 316 685-5926  
 Cellular # 620 437-7582 Shop Address: 3613A Y Road  
 Madison, KS 66860

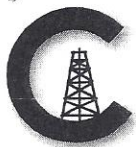
PKR	No. Pcs	Length		Total		No. Pcs	Length		Total		No. Pcs	Length		Total		No. Pcs	Length		Total			
		Ft.	Ins.	Ft.	Ins.		Ft.	Ins.	Ft.	Ins.		Ft.	Ins.	Ft.	Ins.		Ft.	Ins.	Ft.	Ins.	Ft.	Ins.
	1	31	—			31	31	67			61					91						
	2	31	68			32	31	57			62					92						
	3	31	60			33	31	18			63					93						
	4	31	21			34	31	72			64					94						
	5	28	95			35	31	82			65					95						
	6	30	54			36	30	82			66					96						
	7	31	01	216		37	31	25			67					97						
	8	31	37			38	31	33			68					98						
	9	31	28			39	31	50			69					99						
	10	29	71	308	35	40	31	80	314	70	70					100						
	11	31	18			41	32	61			71					101						
	12	30	90			42	29	81			72					102						
	13	31	78			43	30	06			73					103						
	14	29	80			44	30	41			74					104						
	15	30	55			45	30	07			75					105						
	16	30	90			46	30	63			76					106						
	17	31	35			47	31	07			77					107						
	18	30	47			48	30	38			78					108						
	19	31	19			49	31	68			79					109						
	20	31	60	309	72	50	31	28	308	—	80	1553	96			110						
	21	30	60			51	30	87			81	1584	83			111						
	22	32	51			52	31	79			82	1616	62			112						
	23	31	81			53	30	57			83	1647	19			113						
	24	30	74			54	31	46			84					114						
	25	31	61			55	30	59			85					115						
	26	30	05			56	30	10			86					116						
	27	30	64			57	32	53			87					117						
	28	31	80			58	32	12			88					118						
	29	31	73			59	30	54			89					119						
	30	31	70	313	19	60	31	43			90					120						
	Total					Total					Total					Total						

W/O PKR	
1	
2	
3	
4	

No. Joints \_\_\_\_\_

Tallied by \_\_\_\_\_





**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 # 252033

Invoice Date: 08/14/2012 Terms:

Page 1

CFA OIL CO  
BOX 252  
BONNER SPRINGS KS 66012  
( ) -

DOWNEY RANCH INC #2  
37831  
29-10S-9E  
08-12-12  
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	210.00	14.9500	3139.50
1102	CALCIUM CHLORIDE (50#)	590.00	.7400	436.60
1118B	PREMIUM GEL / BENTONITE	300.00	.2100	63.00
1107	FLO-SEAL (25#)	80.00	2.3500	188.00
4106	8 5/8" CEMENT BASKET	1.00	320.0000	320.00

Description	Hours	Unit Price	Total
445 CEMENT PUMP (SURFACE)	1.00	825.00	825.00
445 EQUIPMENT MILEAGE (ONE WAY)	100.00	4.00	400.00
445 MISC. PUMP (CEMENT TRUCK) MIT WASH	3.00	200.00	600.00
479 TON MILEAGE DELIVERY	752.00	1.34	1007.68
611 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 4147.10 Freight: .00 Tax: 302.73 AR 7632.51  
 Labor: .00 Misc: .00 Total: 7632.51  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4914



TICKET NUMBER 37831  
 LOCATION Eureka KS  
 FOREMAN Shannon Feck

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

FIELD TICKET & TREATMENT REPORT

CEMENT API # 161-20079

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-12-12	3115	Downey Ranch Inc #2	29	105	9 E	Riley
CUSTOMER CFA oil company dba Don Clark			Summit DRL6			
MAILING ADDRESS P.O. Box 252			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Bonnel Springs			445	Dave G		
STATE KS			479	merle R		
ZIP CODE 66012			611	Allen B		

JOB TYPE Surface HOLE SIZE 12 1/4" HOLE DEPTH 186' CASING SIZE & WEIGHT 8 5/8"  
 CASING DEPTH 169' 6" DRILL PIPE \_\_\_\_\_ TUBING 1" Tubing OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.5-15 # SLURRY VOL \_\_\_\_\_ WATER gal/sk 6.4 CEMENT LEFT in CASING 15'  
 DISPLACEMENT 10.5 Bbl DISPLACEMENT PSI 100 MIX PSI 100 RATE 5 BPM

REMARKS: Safety Meeting, Rig up to 8 5/8" Casing, Break Circulation w/ 1/2 Bbl water & go directly to cement. Mixed 160SKS Class "A" Cement with 3% calcium, 2% gel, & 1/2 # Flo-tele/sk @ 14.5-15#/gal. Displace with 10 1/2 Bbl & shut casing in. Good circulation @ all times but no cement returns, wait 2 hours tag cement @ approx 20' from G.L. Down. Run 8 5/8" cement Basket from G.L. Down @ 50'. Mixed 50 SKS Class "A" Cement through 1" Tubing tagged @ approx 25' Good cement returns to surface keep hole full, Job Complete. Thanks Shannon & crew"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	100	MILEAGE	4.00	400.00
5609	3 Hours	misc pump charge	200.00	600.00
11045	210 SKS	Class "A" Cement	14.95	3139.50
1102	590 #	Calcium @ 3%	.74	436.60
1118B	300 #	Gel @ 2%	.21	63.00
1107	80 #	Flo-tele @ 1/2 #/sk	2.35	188.00
4106	1	8 5/8" Cement Basket	320.00	320.00
5407A	7.52 Tons	Ton mileage bulk Truck - 1st Truck	1.34	1007.68
5407	2.35 Tons	Ton mileage bulk Truck - 2nd Truck	M/C	350.00
			Sub Total	7329.78
			SALES TAX	302.73
			ESTIMATED TOTAL	7632.51

Ravin 3737

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AUTHORIZATION Don Clark 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.