

### Kansas Corporation Commission Oil & Gas Conservation Division

1095955

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:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
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:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: Feet  Multiple Stage Cementing Collar Used?
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Onv. to ENHR	Chloride content: ppm Fluid volume: bbls  Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
☐ ENHR         Permit #:           ☐ GSW         Permit #:	County: Permit #:
GGW Fellill #.	
Spud Date or Date Reached TD Completion Date or 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 II Approved by: Date:					

Side Two



Operator Name: \_ Lease Name: \_ \_ Well #: \_ 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 Wireline Logs surveyed. Attach final geological well site report. **Drill Stem Tests Taken** Yes No Log Formation (Top), Depth and Datum Sample (Attach Additional Sheets) Name Top Datum Samples Sent to Geological Survey ☐ Yes □ No Cores Taken Yes No Electric Log Run Electric Log Submitted Electronically Yes No (If no, Submit Copy) List All E. Logs Run: CASING RECORD Used New Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight # Sacks Type and Percent Type of Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Additives Depth Cement Used ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth TUBING RECORD: Size: Set At: Packer At: Liner Run: No Yes Producing Method: Date of First, Resumed Production, SWD or ENHR. Pumping Gas Lift Other (Explain) Flowing **Estimated Production** Bbls. Water Bbls. Gas-Oil Ratio Oil Gas Mcf Gravity Per 24 Hours **DISPOSITION OF GAS:** METHOD OF COMPLETION: PRODUCTION INTERVAL: Open Hole Dually Comp. Perf. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)

Form	ACO1 - Well Completion
Operator	Klabzuba Oil & Gas, Inc.
Well Name	Dorzweiler Trust 2-11-13-20
Doc ID	1095955

# All Electric Logs Run

DIL	
DUCP	
Sonic	
Microresistivity	



TICKET NUMBER\_ LOCATION Oakley FOREMAN KELLY Gabe

SALES TAX

**ESTIMATED** TOTAL

DATE 2 23-12

PO Box 884, Chanute, KS 66720

Ravin 3737

#2:00AM

**AUTHORIZTION** 

## FIELD TICKET & TREATMENT REPORT

20-431-9210	or 800-467-867	6		CEMEN	1T			k <-
DATE	CUSTOMER#	WEL	L NAME & NUN		SECTION	TOWNSHIP	RANGE	COUNTY
2-23-12	41471	Dorzwei	ler trus	5+ 2-11-13-2	2	13	20	Ellis
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K MAILING ADDRE	labzuba Ess	011469	<u> </u>	$\frac{y_2}{z}$	TRUCK#	DRIVER	TRUCK#	DRIVER
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CITY	· · · · · · · · · · · · · · · · · · ·	STATE	ZIP CODE	-11n+0			<u> </u>	
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	263						OTHER	
					sk			
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ACCOUNT CODE	QUANIT	Y or UNITS		ESCRIPTION o	of SERVICES or PI	RODUCT	UNIT PRICE	TOTAL
54615	1	n 1101	PUMP CHAR	RGE			10859	108500
5-406	30		MILEAGE				550	15000
11045	3005		01955	A Cours	217+		1765	353000
1102	564		Calc	ium CY	Moride		,89	50196
111813	376		Bente	nite			.25	9400
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5407A	9,4		Ton m	deage c	delivery		167	470 94
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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.

TITLE\_



#### DRILL STEM TEST REPORT

KlabzubaOil & Gas Inc.

2-13s-20w-Ellis

**Dorzweiler Trust** 

Reference Elevations:

Job Ticket: 46442

Tester:

DST#: 1

2169.00 ft (KB)

2161.00 ft (CF)

Denver, CO, 80202 ATTN: Dave Goldak

ft (KB) (TVD)

700 17th Street

**Suite 1300** 

Test Start: 2012.02.28 @ 01:38:43

#### **GENERAL INFORMATION:**

LKC-"A-C" Formation:

Deviated: 0.00 ft (KB) Test Type: Conventional Bottom Hole (Initial) No Whipstock:

Time Tool Opened: 04:36:43 Time Test Ended: 09:33:43

Interval:

Unit No: 54

Total Depth: 3520.00 ft (KB) (TVD)

Hole Diameter: 7.80 inches Hole Condition: Good KB to GR/CF: 8.00 ft

Jason McLemore

Serial #: 8366 Inside

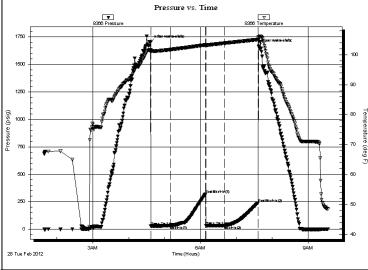
Press@RunDepth: 3507.00 ft (KB) 33.49 psig @ Capacity: 8000.00 psig

Start Date: 2012.02.28 End Date: 2012.02.28 Last Calib.: 2012.02.28 Start Time: 01:38:45 End Time: 2012.02.28 @ 04:36:28 09:33:43 Time On Btm: Time Off Btm: 2012.02.28 @ 07:37:13

TEST COMMENT: IFP-WeakBlow, Built to 1"

ISI-Dead FFP-Dead FSI-Dead

ft (KB) To



	PRESSURE SUMMARY					
Ī	Time	Pressure	Temp	Annotation		
	(Min.)	(psig)	(deg F)			
	0	1701.26	101.60	Initial Hydro-static		
	1	29.53	100.89	Open To Flow (1)		
	34	32.48	101.69	Shut-In(1)		
7	92	321.03	103.24	End Shut-In(1)		
Temperature	93	32.92	103.04	Open To Flow (2)		
rature	124	33.49	103.83	Shut-In(2)		
dea	180	239.63	105.03	End Shut-In(2)		
פ	181	1665.50	105.82	Final Hydro-static		

#### Recovery

Description	Volume (bbl)
Mud W/Oil Spots	0.01
	·

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

Trilobite Testing, Inc. Ref. No: 46442 Printed: 2012.02.28 @ 11:49:58



### DRILL STEM TEST REPORT

**FLUID SUMMARY** 

ppm

KlabzubaOil & Gas Inc.

2-13s-20w-Ellis

700 17th Street Suite 1300

Job Ticket: 46442

**Dorzweiler Trust** 

DST#:1

Denver, CO. 80202 ATTN: Dave Goldak

Test Start: 2012.02.28 @ 01:38:43

Water Salinity:

**Mud and Cushion Information** 

Mud Type: Gel Chem Cushion Type: Oil API: deg API

Mud Weight: 9.00 lb/gal Cushion Length: ft

Viscosity: 50.00 sec/qt Cushion Volume: bbl

Water Loss: 6.41 in³ Gas Cushion Type:

Resistivity: ohm.m Gas Cushion Pressure: psig

Salinity: 1900.00 ppm Filter Cake: inches

#### **Recovery Information**

#### Recovery Table

Length ft	Description	Volume bbl
1.00	Mud W/Oil Spots	0.014

Total Length: 1.00 ft Total Volume: 0.014 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments: Sampler-15#,3000ml Mud W/OilSpots

Trilobite Testing, Inc Ref. No: 46442 Printed: 2012.02.28 @ 11:49:58

