

Kansas Corporation Commission Oil & Gas Conservation Division

1096208

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? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: feet depth to: w/ sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD ☐ Conv. to GSW	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	QuarterSecTwpS. R East West
GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or 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 II Approved by: Date:				

Side Two



Operator Name:			Lease Name	e:			_ Well #:	
Sec Twp	S. R	East West	County:					
time tool open and clos	sed, flowing and shut s if gas to surface tes	I base of formations per in pressures, whether set, along with final chart well site report.	shut-in pressure	reached s	static level,	hydrostatic press	sures, bottom h	ole temperature, fl
Orill Stem Tests Taken (Attach Additional S		Yes No		Log	Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolo		☐ Yes ☐ No	N	lame			Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	I Electronically	Yes No Yes No Yes No						
List All E. Logs Run:			RECORD [Used			
	Size Hole	Report all strings set- Size Casing	-conductor, surface Weight		ate, producti Setting	on, etc. Type of	# Sacks	Type and Percen
Purpose of String	Drilled	Set (In O.D.)	Lbs. / Ft.		Depth	Cement	Used	Additives
		ADDITIONA	L OFMENTING (00115575	DECORD			
		ADDITIONA	L CEMENTING / :	SQUEEZE	RECORD			
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	d		Type and F	Percent Additives	
Shots Per Foot		ON RECORD - Bridge Plu ootage of Each Interval Pe				cture, Shot, Cement mount and Kind of Ma	•	d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Line	r Run:	Yes No		
Date of First, Resumed I	Production, SWD or ENI	HR. Producing Me	thod:	Gas Li	ift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	В	ols. (Gas-Oil Ratio	Gravity
DISPOSITIO	Used on Lease	Open Hole	METHOD OF COM Perf. D (Sub	MPLETION: ually Comp omit ACO-5)	. Cor	nmingled mit ACO-4)	PRODUCTIO	DN INTERVAL:
(If vented, Sub	mit ACO-18.)	Other (Specify) _						

CST Oil & Gas Corporation

1690 155th St. Fort Scott, Ks

Fax: 1-620-829-5306

Office: 1-620-829-5307

Cement & Acid Report

ind of Job Dlus	ayne 10-3385	Sec. 33	Twp. 3	Rng. 25E
Quantity	Materials Used			
8050045	Portland Ceme	nt		
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/ell T.D. <u>465</u>		Csg. S	et At	Volume
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emarks:				
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Witnessed By:				
ame Ch. C	thatton Name	O.L. dillie	Name 4/	11. 111/00

802 N. Industrial Rd. P.O. Box 664 Iola, Kansas 66749 Phone: (620) 365-5588



CONDITIONS

Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery at owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum altotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength red when water is actified at customer's required.

NOTICE TO OWNER

Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filling of a mechanic's lien on the property which is the subject of this contract.

CASH CUSTOMER Wunderly 11-3

RUNNING FOXES PETROLEUM 1690 155TH ST 54 E TO 155TH N 3 MI TO

POPLAR RD E N SD

CORT COUTT VS 66701

	· · · · · · · · · · · · · · · · · · ·	A STATE OF THE STA			C. 1	
FORMULA	LOAD SIZE	YARDS ORDERED		DRIVER/TRUCK		PLANT/TRANSACTION #
			4 CAL	WK	4 019	
ELL	13.00 yd	15. 0 0 yd	0.00	35	v. 00	BOUCO
	LOAD#	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER
o Date	1	15.00 yd				
oday	1	15.00 vd	19452	6/yd 0. 0	4. ԹԱ <u>i</u> n	20888
	E'L	ELL 13.00 yd LOAD#	ELL 13.00 yd 15.00 yd LOAD# YARDSDEL Date 1 15.00 yd oday 1 15.00 yd	FORMULA LOAD SIZE YARDS ORDERED	FORMULA LOAD SIZE YARDS ORDERED SHIVER FROCK	FORMOLA LOAD SIZE YARDS ORDERED DRIVER/THOCK

WARNING

IRRITATING TO THE SKIN AND EYES
Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY
CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of
Contact With Skin or Eyes, Flush Thoroughly With Water. # Intetion Persists, Get Medical
Attention. KEEP CHILDREN AWAY.

CONCRETE IS A PERISHABLE COMMODITY and BECOMES the PROPERTY of the PURCHASER UPON LEAVING the PLANT. ANY CHANGES OR CANCELLATION of ORIGINAL INSTRUCTIONS MUST be TELEPHONED to the OFFICE BEFORE L**OADING** STARTS.

The undersigned promises to pay all costs, including reasonable attorneys' fees, incurred in collecting any sums owed.

All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per arraum. Not Responsible for Reactive Aggregate of Color Quality. No Ciaim Allowed Unless Made at Time Material is Delivered. PROPERTY DAMAGE RELEASE
(TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)

Excessive Water is Detrimental to Concrete Performance H₂0 Added By Request/Authorized By

WEIGHMASTER

A \$25 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks. Excess Delay Time Charged @ \$50/HR. DESCRIPTION QUANTITY UNIT PRICE EXTENDED PRICE CODE HELL (IN SACKS PER UNIT) 15.00 HELL 2.50 102.50 TRUCK ING TRUCK IN CHARGE 1 15.00 MIXAHOUL MIXING & HAULING RETURNED TO PLANT FINISH UNLOADING DELAY EXPLANATION/CYLINDER TEST TAKEN LEFT JOB TIME ALLOWED SLOPPOUR OR PUMP TRUSH AHEAD ON JOB CONTINICTOR BROKE DOWN ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER LEFT PLANT ARRIVED JOB START UNLOADING TIME DUE ADDITIONAL CHARGE 1 TOTAL ROUND TRIP TOTAL AT JOB UNLOADING TIME **DELAY TIME** ADDITIONAL CHARGE 2 GRAND TOTAL

CST Oil & Gas

Operator:	K.	<u> </u>	(אס יאלי :Well	2-1	6-2
Spud Date:	10-7-11	Completion Date		Surface Siz	e: 854
Depth	Fo	rmation	Remarks	Casin	g Tally
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30.65



CST Oil & Gas



Operator: 🦠	RP P	Well: Files	100	2877-3
Spud Date: 🎢	2/2 -// Completion Date	Well: Page 2: 10 13-1/Bit Size/634	Surface Siz	:e: <i>89</i>
Depth	Formation	Remarks	Casin	ng Tally
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CST Oil & Gas



Operator:	RPP	Well: Payre e: 10-19-1/ Bit Size: 634	10-3318-4
Spud Date:	10-13-[/ Completion Date	e: 10 - 19-1/ Bit Size: 634	Surface Size: 8
Depth	Formation	Remarks	Casing Tally
	- Pro		0 7
	Elm		7 6.
	Shalle		16 117
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	all Sur D	Sand May	1/2 /83
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