

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1100078

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 East / West Line of Section
Contact Person:	
Phone: ()	
CONTRACTOR: License #	County:
Name:	
Wellsite Geologist:	
Purchaser:	-
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.): If Workover/Re-entry: Old Well Info as follows:	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/
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWE	Chloride content: ppm Fluid volume: bbls
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	License #:
SWD Permit #:	QuarterSec TwpS. R East 🗌 West
ENHR Permit #:	County: Permit #:
GSW Permit #:	
Spud Date or Recompletion Date 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	1100078
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 No	L	-	n (Top), Depth an	d Datum Top	Datum
Samples Sent to Geolog	jical Survey	Yes No	Null			iop	Datam
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASIN		ew Used			
		Report all strings se	t-conductor, surface, inte	ermediate, producti	ion, 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: 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		RD - Bridge P Each Interval I)e			ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed I	Product	ion, SWD or ENHF	λ .	Producing N	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITIC	ON OF C	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit)	Comp. ACO-5)	Commingled (Submit ACO-4)		
(If vented, Sub	omit ACC)-18.)		Other (Specify)						





TICKET NUMBER 36325

LOCATION EurokA FOREMAN Russell meloy

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

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WEL	L NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
6-28-2012	6605	MANNSC	hreck *	⁴ 10	32	32	17	Coffey
CUSTOMER		-						
Quest	Devel	opment			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	ESS	<u> </u>			485	Alen B		
P.O. Bo	× 413				611	JOEY		
CITY		STATE	ZIP CODE	1	783	McCar		
TOIA		KS	66749					
JOB TYPE -/-	5 0	HOLE SIZE		HOLE DEPTH	1044	CASING SIZE & W	/EIGHT_ 2 7/1	3 Tubing
CASING DEPTH	1034				<u>8/۲</u>		OTHER	-
SLURRY WEIGH	SLURRY WEIGHT 13.8 SLURRY VOL 32 Bbl WATER gal/sk CEMENT LEFT in CASING							
DISPLACEMENT	<u>685</u>	DISPLACEMEN	T PSI	MIX PSI		RATE		
REMARKS: S	REMARKS: SAfely meeting Rig up to 270 Tubing, BITAK circulation w/5							
	Bbl frash water mix + fump 4 ski Gel, Bring Gel to SurFACE up pit							
water u	1 lots 0	Fouting	s mir	125 SK	<u>sowc</u> w	11/2 # Ph.	enseal A	+ 13.8
1-1/ gallen.	Shot Dow	N, WASh	out pun	np + Li	Nos Drop	2 Pluss	DisPlace	w/ 6.05
351 wett	Fingl F	wal PSJ	400 # B.	mp to 1	1.100 # ch	CCIL FIOAT	FILTI	HEIA.
GOOD Cor	nent Retu	rais do 1	for FACE.	5 Bbl 5	lurry, cl	ose Tubin	g IN At	OPSE
CEMENT	STAYED F	UII ON A	Noulas.					
		-		THANK	· // .			
				\sim	ung La	1		

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401		PUMP CHARGE	1030.00	1030.00
5406	.50	MILEAGE	4.00	200.00
1126	125 SKS	owe coment	18.80	2350.00
1107 A	62 *	Phenosent 12 # Par/s/C	1.29	79.9B
1118 B	300 #	gel Flush	. 21	63.00
5407 A	6.5 Jon	TON MiltAge Bulk Truck	1.34	435.50
5502 C	4 hri	BO BOI UNC Truck	90.00	360.00
1123	3.000 gallani	city water	16.50/ 1000	49.50
λ.				
4402	2	2718 TOP rubber Plugs	28.00	56.00
	· · · · · · · · · · · · · · · · · · ·			
				4623.98
			SALES TAX	163.71
Ravin 3737	AK II	260915	ESTIMATED TOTAL	4787.69
AUTHORIZTION	ATV Work	TITLE	DATE_6-2	

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

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Lease Name: Mannschreck	Spud Date: 6-27-2012	Surface Pipe Size: 7"	Donth. 10	
Operator: Quest Development	Well # 10	Bit Diameter: 5 7/8"	Depth: 40'	T.D.:1044
Footage taken	Sample type			
0_3	soil			
3_15	clay		- 1	
15_149	shale			
49_192	lime			
92_205	shale			
205_265	lime			1
265_355	shale			
55_418	lime		- 1.	
18_451	shale			
51_590	 A set of the set of			
90_740	lime			
40_743	shale			-
43_764	lime			
64_768	shale			
68_780	lime			
	shale			
80_788	lime			+ <u>-</u>
88_794	shale -			
94_799	lime		-i	
99_834	shale			
34_838	lime			:
38_855	shale			·
55_859	lime			
59_881	shale			
31_886	lime			
	shale			·
4 000	lime			
0.000	shale			
0 000				
0 005	lime			
F 007	shale			
7 004	lime			
	shale			
	1st cap			
	top of sand, good bleed			
	good sand			
	proken free oil			
9_991	oadly broken		+	
1_1044	shale			
1044				
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