



KANSAS CORPORATION COMMISSION 1100811  
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: \_\_\_\_\_



1100811

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Franklin County, KS  
Well: S. Beckmeyer I-50  
Lease Owner: Triple T

Town Oilfield Service, Inc.  
(913) 837-8400

Commenced Spudding:  
11/7/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
36	Soil-Clay	36
6	Lime	42
4	Shale	46
16	Lime	62
7	Shale	69
10	Lime	79
3	Shale	82
2	Lime	84
2	Shale	86
14	Lime	100
50	Shale	150
20	Lime	170
80	Shale	250
17	Lime	267
25	Shale	292
6	Lime	298
21	Shale	319
2	Lime	321
21	Shale	342
3	Lime	345
9	Shale	354
7	Lime	361
4	Shale	365
12	Lime	377
10	Shale	387
21	Lime	409
4	Shale	413
4	Lime	417
4	Shale	421
6	Lime	427
3	Shale	430
3	Sand	433
7	Sandy Shale	440
15	Shale	455
9	Sandy Shale	464
14	Shale	478
49	Sandy Shale	527
22	Shale	549
1	Sand	550
5	Sand	555

Franklin County, KS  
Well:S. Beckmeyer I-50  
Lease Owner:Triple T

Town Oilfield Service, Inc.  
(913) 837-8400

Commenced Spudding:  
11/7/2012

4	Sandy Shale	559
38	Shale	597
4	sand	601
6	Shale	607
8	Lime	615
6	Shale	621
3	Lime	624
3	Shale	627
2	Lime	629
4	Coal	633
5	Shale	638
4	Lime	642
2	Shale and Lime	644
12	Shale	656
3	Lime	659
10	Shale	669
8	Lime and Shale	677
2	Lime	679
26	Shale	705
8	Sand	713
5	Sand	718
3	Sand	721
1	Sand	722
6	Sand	728
7	Sand	735
1	Sand	736
5	Sandy Shale	741
18	Shale	819-TD

# Short Cuts

## TANK CAPACITY

BBLs. (42 gal.) equals  $D^2 \times 14 \times h$   
D equals diameter in feet,  
h equals height in feet.

## BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

## TO FIGURE PUMP DRIVES

- \* D - Diameter of Pump Sheave
- \* d - Diameter of Engine Sheave
- SPM - Strokes per minute
- RPM - Engine Speed
- R - Gear Box Ratio
- \*C - Shaft Center Distance

D -  $RPM \times d$  over  $SPM \times R$

d -  $SPM \times R \times D$  over RPM

SPM -  $RPM \times D$  over  $R \times d$

R -  $RPM \times D$  over  $SPM \times d$

$$\text{BELT LENGTH} = 2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$$

\* Need these to figure belt length

$$\text{TO FIGURE AMPS: } \frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$$

746 WATTS equal 1 HP

# Log Book

Well No. 1-50

Farm South Beckmeyers

KS Franklin  
(State) (County)

32 15 26  
(Section) (Township) (Range)

For Travis Tool  
(Well Owner)

## Town Oilfield Services, Inc.

1207 N. 1st East  
Louisburg, KS 66053  
913-710-5400



South Beckman Farm Crankline County

KS State; Well No. 1-50

Elevation 1018

Commenced Spuding 11-7, 20 12

Finished Drilling 11-8, 20 12

Driller's Name Chad Wecaw

Driller's Name

Driller's Name

Tool Dresser's Name Cole Holcom

Tool Dresser's Name

Tool Dresser's Name

Contractor's Name TOS

32 15 21

(Section) (Township) (Range)

Distance from 5 line, 50 ft.

Distance from E line, 2030 ft.

0630 - 0627 - 71ms

CAR OR TRUCK NO.

UN (N.P. OR TRUCK CO.)

NO.	FEET		IN.		FEET		IN.		FEET		IN.	
1	31	60	32	25								
2	28	40	32	10								
3	29	90	32	15								
4	31	80	32	10								
5	27	70	29	60								
6	27	70										
7	32											

### 3 - sacks CASING AND TUBING RECORD

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_

6<sup>3</sup>/<sub>8</sub>" Set 21' 8" Pulled \_\_\_\_\_

6<sup>1</sup>/<sub>4</sub>" Set \_\_\_\_\_ 6<sup>1</sup>/<sub>4</sub>" Pulled \_\_\_\_\_

4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_

2<sup>7</sup>/<sub>8</sub>" Set <sup>85</sup> 301 <sup>05</sup> 770 Baffle  
819 70 2" Pulled \_\_\_\_\_


Thickness of Strata	Formation	Total Depth	Remarks
36	soil/clay	36	
6	lime	42	
4	shale	46	
16	lime	62	
7	shale	69	Dark
10	lime	79	
3	shale	82	
2	lime	84	
2	shale	86	
14	lime	100	
50	shale	150	
20	lime	170	
80	shale	250	
17	lime	267	
25	shale	292	
6	lime	298	
21	shale	319	
2	lime	321	
21	shale	342	
3	lime	345	
9	shale	354	
7	lime	361	
4	shale	365	
12	lime	377	
10	shale	387	
21	lime	409	
4	shale	413	

413

Thickness of Strata	Formation	Total Depth	Remarks
4	Lime	417	
4	shale	421	
6	Lime	427	
3	shale	430	Mertha
3	sand	433	
7	sandy shale	440	gray, no oil
15	shale	455	
9	sandy shale	464	
14	shale	478	
49	sandy shale	527	
22	shale	549	
1	sand	550	
5	sand	555	
4	sandy shale	559	along, o.i., ok bleed
38	shale	597	
4	sand	601	gray, no oil
6	shale	607	
8	Lime	615	
6	Shale	621	
3	Lime	624	
3	shale	627	
2	Lime	629	
4	coal	633	
5	shale	638	
4	Lime	642	
2	shale & Lime	644	
12	shale	656	







**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 35196

LOCATION Ottawa KS

FOREMAN Fred Maden

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/8/12	19166	So. Beckmeyer #1-50	SE 32	15	21	FR
CUSTOMER <u>Triple T</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>105 E Amity</u>			506	Fred Mad	Safety	Mix
CITY <u>Louisburg</u>	STATE <u>KS</u>	ZIP CODE	495	Harv Bee	14B	
			510	Set Tuc	5T	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 820' CASING SIZE & WEIGHT 2 7/8 EUE  
 CASING DEPTH 801' DRILL PIPE Baffle in TUBING @ 770 OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2 Plug + 36'  
 DISPLACEMENT 4.48 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Establish pump rate - Mix & Pump 100# Gel Flush. Mix & Pump  
 110 sks 50/50 Poz Mix Cement. 270 Gel. Permit to surface  
 Flush pump & lines clean. Displace 2 1/2" Rubber plug to  
 baffle in casing. Pressure to 800# PSI. Release pressure  
 - Hold & Monitor Pressure for 30 min MIT. Release  
 pressure to set float valve. Shut in casing.

Customer Supplied H<sub>2</sub>O  
 To S Drilling - Chad

*Fred Maden*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 <sup>00</sup>
5406	20 mi	MILEAGE	495	80 <sup>00</sup>
5402	80L	Casing footage		N/C
5407	Minimum	Ton Miles	510	350 <sup>00</sup>
1124	110 SKS	50/50 Poz Mix Cement		120450
115B	285#	Premium Gel		5980
4402	1	2 1/2" Rubber Plug		28 <sup>00</sup>
<b>SCANNED</b>				
			7.52	SALES TAX 100 <sup>00</sup>
				ESTIMATED TOTAL 2853 <sup>25</sup>

Ravin 3737

AUTHORIZATION *[Signature]*

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