



KANSAS CORPORATION COMMISSION 1101323
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: _____



1101323

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 37760
LOCATION #180 Eldorado
FOREMAN Jacob Storm

FIELD TICKET & TREATMENT REPORT

CEMENT

Api 015-23954-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
9-22-12		North Fox Bush #7	26	285	SE	Butler	
CUSTOMER	SAFETY MEETING			TRUCK #	DRIVER	TRUCK #	DRIVER
Braden Petro and well	J.S m.g			603	Jeff		
MAILING ADDRESS				681	mark		
CITY	STATE	ZIP CODE			511	Jacob	

JOB TYPE Longstring B HOLE SIZE 7 7/8 HOLE DEPTH 2857 CASING SIZE & WEIGHT 5 1/2 used
 CASING DEPTH 2848 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15 lb SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 68.35 DISPLACEMENT PSI 1000 MIX PSI 300 RATE 5 bpm

REMARKS: Safety meeting, Run pipe, centralizers on 1,2,3,5,18,20,22, Basket on 4, circulate on bottom for 1hr, pump 5 bbl water 500 gal (DV1100) 5 bbl water mix 150 sks thick set 5% Kol-seal, Relise plug, displace with 68.35 bbl water landing plug at 1150 psi checked float, float held

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE	1030.00	1030.00	
5406	18	MILEAGE	4.00	72.00	
5407	1	min bulk delivery	350.00	350.00	
5402	350	footage	.22	77.00	
1126 A	150 sks	thick set	19.20	2880.00	
1110 A	750 lbs	Kol-seal	.46	345.00	
11446	500 gal	DV 1100 (mud flush)	1.05	N/C	
4104	1	5 1/2 Baskets	229.00	229.00	
4130	7	5 1/2 centralizer	48.00	336.00	
4159	1	5 1/2 AFU	344.00	344.00	
4454	1	5 1/2 Latchdown plug	254.00	254.00	
				Subtotal	5917.00
				SALES TAX	
				ESTIMATED TOTAL	

Ravin 3737

AUTHORIZATION James L Brader 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.

GEOLOGICAL REPORT

Radon Petroleum & Well Plugging Co.

North Fox Bush #7

N/2 N/2 SW SE Section 26-T28S-R5E

Butler County, Kansas

COMMENCED: 09-17-12
COMPLETED: 09-22-12
CONTRACTOR: C & G Drilling, Inc.
DIAMETER OF HOLE: 7 7/8"
REFRIGERANT PIPE: 8 5/8"
COMMENTED WITH: N/A
LOGGING STRING: 5 1/2"
COMMENTED WITH: N/A
LOGGING ID: 2857

STATUS: Oil
A.P.I. #: 15-015-23954
OPERATOR LLC.: 32475
FIELD: Fox-Bush-Couch
ELEVATION: 1359 K.B.
LOGS: None
MUD SYSTEM: Chemical
OTHER:

*William M. Stout
9-24-12*

William M. Stout
Geologist

FORMATION TOPS

1352 G.L. 1359 K.B.

	<u>Sample</u>
Kansas City	2190 -831
Base Kansas City	2381 -1022
Marmaton	2437 -1078
Cherokee	2626 -1267
Ardmore	2690 -1331
Upper Bartlesville Zone	2778 -1419
Lower Bartlesville	2807 -1448
Mississippi	2838 -1479
Total Depth	2857 -1498

SAMPLE DESCRIPTIONS

Kansas City 2190' (-831)
2190' - 2106'

Limestone - light brown, fine crystalline, fossiliferous, some dense, fair odor, light stain, show free oil with gas bubbles, vugular and intercrystalline porosity with fluorescence.

Upper Bartlesville Zone 2778' (-1419)

2778' - 2792'

2807' - 2827'

Sandstone - light brown, fine grain, good odor, light stain, few clusters bleeding oil, abundant loose grains near bottom, fair porosity with good fluorescence.

2828' - 2837'

Sandstone - gray, fine grain, calcareous, good odor, scattered stain, show free oil, plenty flaky black dead oil, spotty fluorescence.

CONCLUSIONS

The decision was made to run 5 1/2 inch casing to further evaluate the Upper and Lower Bartlesville sands and the Kansas City through perforations..

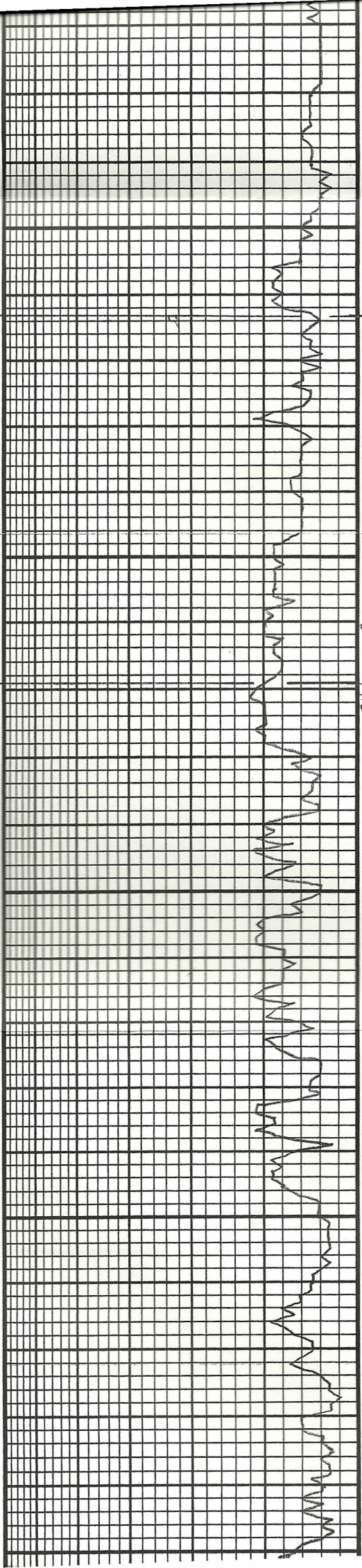
LEGEND



DRILLING TIME IN MINUTES PER FOOT Rate of Penetration Decreases 5" 10" 15" 20" 25"	DEPTH	LITHOLOGY	SAMPLE DESCRIPTIONS	OIL SHOWS	REMARKS
					G.L. 1352
					K.B. 1359
	2100	[Lithology symbol]	SH - GY M - GY GEN.		
		[Lithology symbol]	SH - AA.		
	50	[Lithology symbol]	SH - GY M - GY GEN.		
		[Lithology symbol]	SH - AA.		
		[Lithology symbol]	SH - AA.		
		[Lithology symbol]	SH - AA. W/FR LS - BON. F.X. S/PNS. FOR. SUO PDE. LI. STN. NSPO. CLAMP LOR.		
	2200	[Lithology symbol]	LS - H. BEN. F.X. FOS. S/PNS. FOR. SUO PDE. LI. STN. NSPO. CLAMP LOR. EX: UO 2 1/2 W/FLUR		
		[Lithology symbol]	LS - H. BEN. GY F. 2. FOR. DNS. NS. NUB		
					KANSAS CITY 2190 (-831)

0201-4M

2201-7M



50	LS-LT BEN. TRN. F.X. FOS. N.S. EX. UV & P
50	LS-AN
50	LS-LT BEN. LBY F.X. FOS. HPS N.S. NUP
50	LS-AN / CHRY D/IX
50	LS-AN
50	LS-BEN. LGY F.X. FOS. DMS. HPS. NUP
50	LS-AN
50	SM-BKCNB. WIG
50	LS-BEN. F.Y. FOS. DYS. HPS. NUP w/STP BY DKG/STP
50	SM-BKCNB. PCG GRU.
50	LS-LT BEN. REP. F.X. FOS. DMS. N.S. NUP
50	LS-LT BEN. F.X. FEW FOS. ZMS N.S. EXE
50	SM-GY GRNED DKG
50	SM-DKG BY VICAL. HPS
50	SM-DKG BY CAL. HPS
50	SM-AD w/ FOLS. BK BEN. F.X. DMS. HPS N.S. NUP
50	SM-GY GRNED. STY
50	LS-LT BEN. F.X. DMS. STIC HPS N.S. NUP
50	SM-DKG BY GOM
50	SM-AN w/ STIC. F.L.G. F.6. HPS. N.S. NUP
50	SM-GY GRNED. STY. N.S. NUP
50	SM-GY GRNED. STY. N.S. NUP

MARINATON
2437 (-1078)

BKC
2381 (-1022)

2352

210 (1987-1988)

MISSISSIPPI
2838 (179)

2807 (1918)
PARTIAL STILLS
LATE

2778 (1919)
BARTNSWIE ZON
LATE

2690 (-1331)
HEADMORE

SS-LF. BEN. US. F. M. S. 1/2	50
5-LF. BEN. US. F. M. S. 1/2	
5-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	2800
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	50
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	2700
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	50
SS-LF. BEN. US. F. M. S. 1/2	
SS-LF. BEN. US. F. M. S. 1/2	

