

#### Kansas Corporation Commission Oil & Gas Conservation Division

1103193

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 🗌 East 🗌 West
Address 2:	Feet from North / South Line of Section
City:	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?
If Workover/Re-entry: Old Well Info as follows:	
Operator:	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 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:
GSW Permit #:	County: Permit #:
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 III 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)

# Town Oilfield Service, Inc. Commenced Spudding: 11/13/2012

15-059-26244-00-00

### WELL LOG

hickness of Strata	Formation	Total Depth
39	Soil-Clay	39
5	Shale	44
4	Lime	48
3	Shale	51
16	Lime	67
7	Shale	74
10	Lime	84
3	Shale	87
2	Lime	89
2	Shale	91
14	Lime	105
25	Shale	130
2	Lime	132
24	Shale	156
20	Lime	176
75	Shale	251
22	Lime	273
25	Shale	298
7	Lime	305
20	Shale	325
2	Lime	327
21	Shale	348
2	Lime	350
13	Shale	363
5	Lime	368
2	Shale	370
13	Lime	383
8	Shale	391
23	Lime	414
4	Shale	418
5	Lime	423
4	Shale	427
5	Lime	432
4	Shale	436
6	Sand	442
4	Sandy Shale	446
10	Shale	456
3	Sand	459
71	Sandy Shale	530
23	Shale	553

Franklin County, KS Well:S. Beckmeyer 55 Lease Owner:Triple T

## Town Oilfield Service, Inc. Commenced Spudding: 11/13/2012

2	Sand	555
5	Sand	560
4	Sandy Shale	564
25	Shale	589
3	Sand	592
10	Shale	602
3	Sand	605
7	Shale	612
7	Lime	619
6	Shale	625
5	Lime	630
15	Shale	645
5	Lime	650
12	Shale	662
3	Lime	665
11	Shale	676
9	Lime	685
2	Lime	687
39	Shale	726
3	Sand	729
16	Sand	745
2	Sand	747
8	Broken Sand	755
64	Shale	819-TD
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	0477	
	-11	
	-	
	1	
	en si	

## **Short Cuts**

TANK CAPACITY

BBLS. (42 gal.) equals D<sup>2</sup>x.14xh 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 - RPMxd over SPMxR d - SPMxRxD over RPM SPM - RPMXD over RxD R - RPMXD over SPMxD

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

\* Need these to figure belt length

TO FIGURE AMPS:

WATTS = AMPS

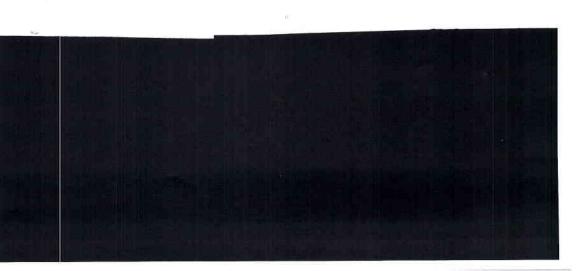
746 WATTS equal 1 HP

## Log Book

Well No. 55	5	
Farm Sam	Beckm	ever
_ KS	_	cultur_
(State)		(County)
32	15	21
(Section)	(Township)	(Range)
For Twiple	7	1:0
	(Well Owner)	

# Town Oilfield Services, Inc.

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



M. Codew Faryn: Learly County  KS State; Well No. 55	C)	ASING AN	ID TUBINO	MEASU	JREMENTS	;
Elevation_1014	Feet	In.	Feet	ln.	Feet	Γ
Commenced Spuding						
Finished Drilling						
Driller's Name and Wear						
Driller's Name						
Driller's Name						
Tool Dresser's Name Dronder Stone				$\sqcup$		
Tool Dresser's Name Cola Holoom				$\parallel \parallel$		
Tool Dresser's Name						
Contractor's Name						_
32 15 21						
(Section) (Township) (Range)						
Distance from S line, 405 ft.						
Distance from line, ft						
x659-0666-7						
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-						
3 1 3 s d 1 2 3						
CASING AND TUBING						
RECORD				_		
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)" Set 10" Pulled						
8" Set 3 Pulled		-		$-\parallel$		_
%" Set 6%" Pulled						-3
" Set 4" Pulled				_		
7 Set 795 2" Pulled						_
219 DO COCE			-1-			

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Thickness of Strata	Formation	Total Depth	Parred
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5	shale	1111	
14	Lime	148	
2	shoile	51	-
16	Line	107	
7	shale	7 4	
10	Lime	84	- Davk
3	Shorte	37	
2	Linc.	499	
2	Shale	91	
F.C.	Lime	105	
વડ	«hale	120	
2	Lime	135	
24	showle	156	
30	Lime	176	
75	shele	1851	
33	Lime	773	
35	shale	208	
	rime	305	with come I.me secur
20	shale	325	red Red "320-325"
2	Lime	327	150 Esa 370-372
21	shale	3.18	
2	Lime	350	
13	shale	263	
S	r.mc	368	
2	Sheele	370	
13	L 117 C2	383	

otal	Total	Formation	Thickness of Strata
pth Remarks	Depth		**
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3	423	Linic	-5
	127	Shoule	- 4
2	132	Linie	5
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		sind	6
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	110	Shale	10
	13C	sund	3
	459	Sudyshale	71
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2	553	slicite	2
1:00 01	555_	التي در رما	5
	560	- Swel	Ч
- coor, oil, ok bleed	5G4	sun yshale	25
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enex; no all	602	Encole	10
	605	Sund	3
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	630	Lince	5
	(45)	shale	15
		ince shale	5 2
<u> </u>	<u> </u>	should	5

-5-

Thickness of Strata	Formation	Total Depth	Remarks
-3	Lime	CG S	Remarks
))	shale	676	
cy	Lime + shale		
2	Lime	687	
39	shale	756	
2	sund	729	5% 10% oder, sich + Was
16	sund	745	
2	sond	747	Gob selid, Good block
8	Broken send	755	46% -50%
64	shale	4/01	ar ar
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	All and a second a		-
		4	
			-
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-7-



TICKET NUMBER 35202	
LOCATION O Hawa &5	
FOREMAN Fined MA	

PO Box 884	, Chanute, KS 66720	FIELD TICKET & TREA	ATMENT PER	ODT	Fred YV	ader
	0 or 800-467-8676	CEME	NT	UKI		
DATE	CUSTOMER#	WELL NAME & NUMBER				
11/14/1	70.		SECTION	TOWNSHIP	RANGE	COUNTY
CUSTOMER		Becknyer \$55	SEBD	15	21	FR
MAILING	iple 1		TRUOW	+		1.0
MAILING ADD	DRESS		TRUCK#	DRIVER	TRUCK#	
100	5 E Amit	1	506	FreMad	Safe	In Mik.
CITY	STATE	ZIP CODE	495	Harber	1413	7 100
Louic	sburg Ks	66053	22.8	Bie Man		1-0
JOB TYPE	Longstry HOLE SIZE	-7,		1		
CASING DEPT	7	Baffle in TUBING		CASING SIZE &	WEIGHT 2.7	E-EVE
SLURRY WEIG			18.5		OTHER	
DISPLACEME	- CLOICK! V	TATER Gairs	sk	CEMENT LEFT I		+2%" Plus
REMARKS: F	- a /a /al S-l. A	MENT PSI MIX PSI		RATE_SBA	W	Tols plu
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C.	stomer Suppli	0 1 1/ 10				
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	Arrived C	had		Tin	IMoch	
ACCOUNT	OHANITY (IIII	T				
CODE	QUANITY or UNITS	DESCRIPTION of S	SERVICES or PROD	ист	11111	- A
5401		PUMP CHARGE			UNIT PRICE	TOTAL
5406	20 mi	MILEAGE		495		103000
5402	795		· · · · · · · · · · · · · · · · · · ·	495		8000
5407	4 1001 1	Cosing Footage	<u></u>			N/C
	12 Minimum	Ton Miles	<del></del>	558		17500
						1/0

CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		
5401		PUMP CHARGE	UNIT PRICE	TOTAL
5406	20 mi	MILEAGE 495		10300
5402	795	40.5		₹₽ <i>6</i>
5407	1/2 Mminum	Cosing Footage		N/C
	- IIII MUM	Ton Miles 558		175°
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1/24	212 (1			
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9	289#	Premion Cel		1226
4402		2'2" Rubber Play		606
		<i>d</i>		2800
				2
	•	At .	a pann	3100
		3pm		10194
3737	1	7.8%	SALES TAX	102.57
HORIZTION	Wesley Dollard		ESTIMATED	
	at the naverant	TITLE	DATE	2702.6

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.