

Kansas Corporation Commission Oil & Gas Conservation Division

1105500

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:	Sec Twp S. R 🗌 East 🗌 West
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 ☐ 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: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Conv. to ENHR	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 Permit #:	Quarter Sec TwpS. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date 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 III Approved by: Date:					

Side Two



Operator Name:				_ Lease N	lame:			Well #:		
Sec Twp	S. R	East	West	County:						
INSTRUCTIONS: Sh time tool open and clo recovery, and flow rate line Logs surveyed. A	osed, flowing and shu es if gas to surface te	t-in pressures, st, along with f	whether sh inal chart(s	nut-in press	ure reach	ed static level,	hydrostatic pres	sures, bottom h	ole temp	erature, fluid
Drill Stem Tests Taker (Attach Additional S		Yes	No		Log	y Formation	n (Top), Depth a	nd Datum		Sample
Samples Sent to Geo	logical Survey	Yes	No		Name			Тор	I	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Copy	d Electronically	Yes Yes Yes	☐ No ☐ No ☐ No							
List All E. Logs Run:										
		Report all	CASING I		New	Used mediate, producti	on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)		Weigi Lbs. /	ht	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
		AI	DDITIONAL	CEMENTIN	G / SQUE	EZE RECORD				
Purpose: Depth Top Bottom Type of Cement — Perforate — Protect Casing — Plug Back TD — Plug Off Zone — Plug Off Zone		ement	# Sacks	Used		Type and	Percent Additives			
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set. Specify Footage of Each Interval Perforated			s Set/Type orated			cture, Shot, Cemei mount and Kind of N		d	Depth
TUBING RECORD:	Size:	Set At:		Packer At:		Liner Run:				
Date of First, Resumed	Production, SWD or EN		ducing Meth	od:		as Lift C	Yes No	0		
Estimated Production Per 24 Hours	Oil	Bbls.		Mcf	Water		ols.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		M	IETHOD OF	COMPLET	ION:		PRODUCTIO	ON INTER	VAL:
Vented Sold	Used on Lease	Open	Hole (Specify)	Perf.	Dually (nmingled mit ACO-4)			

Lease Owner: TOC

Miami County, KS **Town Oilfield Service, Inc.** Commenced Spudding: Well: Lowe I-1 (913) 837-8400 10/26/2012

WELL LOG

Thickness of Strata	Formation	Total Depth		
8	Soil-Clay	8		
44	Shale	52		
9	Lime	61		
15	Shale	66		
9	Sand	75		
20	Shale	95		
6	Lime	101		
17	Shale	118		
10	Sandy Shale	128		
19	Shale	147		
9	Lime	156		
15	Shale	171		
31	Lime	202		
6	Shale	208		
22	Lime	230		
3	Shale	233		
3	Lime	236		
5	Shale	241		
7	Lime	248		
5	Shale	253		
5	Sand	258		
16	Shale	274		
11	Sand	285		
30	Sandy Shale	315		
48	Shale	363		
7	Sand	370		
5	Sandy Shale	375		
28	Shale	403		
1	Sand	404		
4	Sand	408		
6	Sand	414		
5	Sand	419		
10	Sand	429		
3	Sandy Shale	432		
3	Sandy Shale	435		
17	Shale	452		
5	Lime	457		
5	Shale	462		
4	Lime	466		
5	Shale	471		

Miami County, KS Well: Lowe I-1 Lease Owner: TOC

Town Oilfield Service, Inc. Commenced Spudding: 10/26/2012

8	Lime	479-TD
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Miami County, KS Well: Lowe I-1 Lease Owner: TOC

Town Oilfield Service, Inc. Commenced Spudding: 10/26/2012

Consolidated Oli Melli Services, Lile TICKET NUMBER LOCATION Make

	FIF'	LD TICKET & TRE	ATMENT REP	ORT	•	1
O Box 884, Char	nute. Kai pazzu	CEME	NT	TOWNSHIP	RANGE	COUNTY
20-431-9210 or	CUSTOMER# WELL	NAME & NUMBER	SECTION	1		MI
121.21.2	09 (OMELL)	1L -T 1	SW 18	17	1 25	700
// / / **	1823 Laure		, , , ,	DRIVER	TRUCK#	DRIVER
	Oil Co-		TRUCK#	Casher	Satel	Medina
MAILING ADDRESS	S	•	48-1			
16205 1	J. 287 St		1000	Gar Moo		
01TY	ISTATE	ZIP CODE	228	Brenden		1
1	KS	66071	SOS 7106	I Kei Cor	NEIGHT 2 78	TEUF.
<u>raola</u>			PTH 4791	CASING SIZE &	.,,	
JOB TYPE CONC	4/04 DRILL PIPE_	TUBING_			OTHER	
CASING DEPTH	as Many VOI	WATER	jel/sk	CEMENT LEFT I	CASING	
SLURRY WEIGHT	2.7266 S DISPLACEMEN			RATE 4.54	20Mm	
DISPLACEMENT_	1 0 0	· · · · · · · · · · · · · · · · · · ·	station, mi	Ked trung	ped 100-ff	Trelaium.
REMARKS: N.cla	salety means	end we thou will		ed 60 st	5 595-07	DENTINE TO
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					UNIT PRICE	TOTAL
ACCOUNT	QUANITY OF UNITS	DESCRIPTION	ON of SERVICES or F	RODUCT	UNIT PRICE	
CODE		PUMP CHARGE				1030,00
5401				· · · · · ·		160.00
5400	40 mi	MILEAGE				
5402	467	casing tootal	•			350.00
5407	Minimum_	ton milegge		412	<u> </u>	280,00
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260a.11 TOTAL Flevin 9737 AUTHORIZTION No Co. Rep. on location DATE TITLE 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

SALES TAX ESTIMATED

7.55%