

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1108115

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

WEII	HIGTORY	- DESCRIP	NFII &	IFAGE
				LLASL

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:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
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.): If Workover/Re-entry: Old Well Info as follows: Operator:	Amount of Surface Pipe Set and Cemented at: Feed Multiple Stage Cementing Collar Used? Yes If yes, show depth set: Feet If Alternate II completion, cement circulated from: Feet feet depth to: w/ Sx cmt Sx cmt Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume: bbls
Conv. to GSW Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #: SWD Permit #: ENHR Permit #: GSW Permit #:	Dewatering method used:
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 III Approved by: Date:

	Side Two	1108115
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)	☐ Log Name	Formatior	n (Top), Depth an		Sample
Samples Sent to Geolog	gical Survey	Yes No)	Name			Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted B (If no, Submit Copy)	Electronically	Yes No Yes No Yes No	>					
List All E. Logs Run:								
		CAS	ING RECORD	New	Used			
		Report all strings	set-conductor, surfa	ace, interm	nediate, productio	on, etc.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / F		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 RECORD - Bridge Plugs Set/ Specify Footage of Each Interval Perforated				e	,		ement Squeeze Record I of Material Used)	Depth	
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner R	un:	No	
Date of First, Resumed Pr	oduct	on, SWD or ENH	ર .	Producing N		oing	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
									1	
DISPOSITION	OF	BAS:			METHOD (OF COMPLE	TION:		PRODUCTION INTE	RVAL:
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Subm	it ACC	-18.)		Other (Specify)					

CONSOLID Oil Well Servic	Consolidated Oil Well Dept. 9 P.O. Box 4	REMIT TO Consolidated Oil Well Services, LLC Dept. 970 P.O. Box 4346 Houston, TX 77210-4346		MAIN OFFICE P.O. Box 884 ute, KS 66720 •800/467-8676 620/431-0012
INVOICE			Invoice #	253117
Invoice Date: 09/25/2	2012 Terms: 0/0/30,n/30	:======================================	================ Pa	age 1
D & Z EXPLORATION 901 N. ELM ST. P.O. BOX 159 ST. ELMO IL 6249 (618)829-3274		OONOVAN I-1 94932 88-14-21 99-20-2012 KS		
1124 ! 1118B ! 1111 ! 1110A !	Description 50/50 POZ CEMENT MIX PREMIUM GEL / BENTONITE SODIUM CHLORIDE (GRANULA KOL SEAL (50# BAG) 2 1/2" RUBBER PLUG	113.00 290.00	.2100 .3700 .4600	Total 1237.35 60.90 80.66 259.90 28.00
Description 368 CEMENT PUMP 368 EQUIPMENT MILEA 368 CASING FOOTAGE 503 MIN. BULK DELIV T-106 WATER TRANSPORT	ERY	Hours 1.00 30.00 910.00 1.00 1.50	4.00	Total 1030.00 120.00 .00 350.00 168.00

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Parts:	1666.81	Freight:	.00	Tax:	125.43	AR	3460.24
Labor:	.00	Misc:	.00	Total:	3460.24		
Sublt:	.00	Supplies:	.00	Change:	.00		
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DO, KS EUREKA, KS -7022 620/583-7664 PONCA CITY, OK 580/762-2303 OAKLEY, KS 785/672-2227 OTTAWA, KS 785/242-4044

Date

GILLETTE, WY 307/686-4914

TICKET NUMBER34932 LOCATION OF HAWSDOTO CONSOLIDATED ON MAR SERVICES LLCTICKET NUMBER34932 LOCATION OF HAWSPO BOX 884. Chanute, KS 66720FIELD TICKET & TREATMENT REPORT CEMENTDATE CUSTOMERWELL NAME & NUMBERSECTIONOWNSHIPRANGE COUNTYDATE CUSTOMERWELL NAME & NUMBERSECTIONTOWNSHIPRANGE COUNTYOUTO COSTOMERVELL NAME & NUMBERSECTIONTOWNSHIPRANGE COUNTYDATE CUSTOMERWELL NAME & NUMBERSECTIONTOWNSHIPRANGE COUNTYOUTO CUSTOMERWELL NAME & NUMBERSECTIONTOWNSHIPRANGE COUNTYOUTO CUSTOMERWELL NAME & NUMBERSECTIONTOWNSHIPRANGE COUNTYOUTO CUSTOMERWELL NAME & NUMBERSECTIONTOWNSHIPRANGE COUNTYOUTO CUSTOMERTRUCK #DIMEROUTO CUSTOMERTRUCK #DRUPERSETIONTRUCK #DRUPERSETIONTRUCK #DRUPERSETIONTRUCK # <th co<="" th=""></th>	
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Ravin 3737	
SALES TAX 125.43	

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. 253117 Well: Donovan I-**#1** Lease Owner: D Z

Johnson County, KS Town Oilfield Service, Inc. Commenced Spudding: (913) 837-8400

WELL LOG

Thickness of Strata	Formation	Total Depth
5	Soil/Clay	5
12	Sandstone	17
7	Shale	24
2	Lime	26
17	Shale	43
7	Lime	50
4	Shale	54
16	Lime	70
8	Shale	78
8	Lime	86
9	Shale	95
18	Lime	113
19	Shale	132
16	Lime	148
10	Shale	158
57	Lime	215
20	Shale	235
9	Lime	244
19	Shale	263
7	Lime	270
4	Shale	274
9	Lime	283
33	Shale	316
1	Lime	317
11	Shale	328
24	Lime	352
8	Shale	360
24	Lime	384
4	Shale	388
6	Lime	394
3	Shale	397
7	Lime	404
111	Shale	515
8	Sand	523
38	Shale	561
9	Sand	570
7	Shale	577
5	Lime	582
2	Shale	584
1	Lime	585

Johnson County, KS Well: Donovan I-2 Lease Owner: D Z

Town Oilfield Service, Inc. Commenced Spudding: (913) 837-8400 9/17/2012

7	Shale	592
7	Lime	599
17	Shale	616
7	Lime	623
119	Shale	742
4	Sand	746
4	Sandy Shale	750
108	Shale	858
3	Sand	861
2	Sand	863
4	Sand	867
3	Sand	870
4	Sandy Shale	874
3	Sand	877
63	Shale	940-TD
-		