



KANSAS CORPORATION COMMISSION 1119698
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: _____



1119698

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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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PO Box 884, Chanute, KS 66720
620-431-9210 or 800-457-8676

TICKET NUMBER 38776
LOCATION Oil + Gas
FOREMAN Alan Mad

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-1-13		Qin BSP Q 7				Mi

TRUCK #	DRIVER	TRUCK #	DRIVER
516	Alan Mad	Safety	Meat
368	Art McD	MM	
675	M:K Hoo	MH	
510	Get Tac	ST	

CITY	STATE	ZIP CODE

JOB TYPE long string HOLE SIZE 6 HOLE DEPTH 760 CASING SIZE & WEIGHT 2 1/8
 CASING DEPTH 713 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING yes
 DISPLACEMENT 4.1 DISPLACEMENT PSI 300 MIX PSI 200 RATE 4 bpm

REMARKS: Held meeting, Established rate. Mixed & pumped 100# gel followed by 110 sk 50/50 cement plus 270 gal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 80 psi. Green set float closed valve.

JTC, Manuel

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030.00
5426	20	MILEAGE	368	8000
5402	713	casing footage	368	
5407	1/2 m.a.	ten miles	510	175.00
5502C	1 1/2	80 val		135.00
1129	110 sk	50/50 cement		1204.50
1180	285 #	gel		59.85
4402	1	2 1/2 plug		28.00
		2300.00		
		140.50		
		less 5%		
		Total		
		PAID		
		Thanks		
		check # 1102		
		SALES TAX		97.57
		ESTIMATED TOTAL		2801.92

AUTHORIZATION _____ 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.

DRILL LOG

Operator License# 34843

API 15-121-29428-00-00

Operator Qin's Investment, LLC

Lease Name Qin

Address

Well # 7

Contractor JTC Oil, Inc.

Spud Date 1/28/13 Cement 2/1/13

Contractor License__32834

Location_____ of _____

T.D. 740 T.D. of Pipe 713

_____ feet from _____

Surf. Pipe Size_7 _Depth 20 ft.

_____ feet from _____

Kind of Well____ prod.

County Miami

Thickness	Strata	From	To	Thickness	Strata	From	To
3	soil	0	3	53	shale	255	308
5	clay	3	8	6	lime	308	314
15	lime	8	23	1	oil	314-315	ok
7	coal	23	30	2	oil	315-317	good
34	lime	30	64	1	oil	317-318	good
26	shale	64	90	2	oil	318-320	vgood
19	lime	90	109	2	oil lime	320-322	little
89	shale	109	198	13	lime	322-335	
18	lime	198	216	8	black shale	335-343	
22	shale	216	238	23	lime	343-366	
17	lime	238	255	4	coal	366-370	

15	lime	370-385
138	shale	385-523
4	red bed	523-527
11	shale	527-538
16	sand	538-554
12	lime	554-566
20	shale	566-586
4	lime	586-590
17	black shale	590-607
1	lime	607-608
2	oil lime	608-610 little
1	oil lime	610-611 little
7	coal	611-618
5	black shale	618-623
12	lime	623-635
19	shale	635-654
2	lime	654-656
4	coal	656-660
2	oil sand	660-662 little
4	lime	662-666
2	oil sand	666-668 ok
2	oil sand	668-670 ok

1 oil sand 670-671 ok

1 lime 671-672

2 oil sand 672-674 good

66 Shale 674-740