

Kansas Corporation Commission Oil & Gas Conservation Division

124319

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
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.): If Workover/Re-entry: Old Well Info as follows:	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: sx cmt
Operator:	5 111 51 111
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Original Total Depth: 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:
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	

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 Approved by: Date:					

Side Two



Operator Name:			Lease Name	ə:		_ Well #:	
Sec Twp	S. R	East West	County:				
ime tool open and clo	sed, flowing and shut s if gas to surface tes	d base of formations pe -in pressures, whether st, along with final chart well site report.	shut-in pressure	reached static leve	l, hydrostatic pres	sures, bottom h	ole temperature, fluid
Orill Stem Tests Taken (Attach Additional S		Yes No		Log Formati	on (Top), Depth ar	nd Datum	Sample
Samples Sent to Geole	ogical Survey	Yes No	N	lame		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy,	I Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
		CASING Report all strings set	RECORD	New Used	ction, 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
		ADDITIONA	L CEMENTING /	SQUEEZE RECOR	D		
Purpose: — Perforate — Protect Casing — Plug Back TD — Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	1	Type and I	Percent Additives	
Shots Per Foot	PERFORATIO Specify F	ON RECORD - Bridge Plu ootage of Each Interval Pe	gs Set/Type erforated		acture, Shot, Cemen		d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed I	Production, SWD or ENI	HR. Producing Me	thod:	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITIO	Used on Lease	Open Hole		ually Comp.	ommingled ubmit ACO-4)	PRODUCTIO	ON INTERVAL:

DRILL LOG

Operator License# 33741

API# 15-059-26232-00-00

Operator Enerjex Kansas

Lease Name Alexander

Address 27 Corporate Woods, #350

Well# BSI AL 10

Phone 913-754-7754

Spud Date 10/24/12 Cement 10/31/12

Contractor License # 32834

Contractor JTC Oil, Inc.

T.D. 778 T.D. 759

3 sacks cement

Surf. Pipe Size_7"___ Depth_ 20ft_

county Franklin

Thickness	Strata	From	То	Thickness	Strata	From	To
4	avil/clay	6	4		Strate	173	TOA
12	lime	4	16	5	red bed	180	185
1	shale	16	17	35	shale	185	220
31	lime	17	48	8	lime	220	228
85	shale	48	123	1	shale	228	229
20	lime	123	143	5	lime	229	234
5	mix	143	148	11	shale	234	245
2	shale	148	150	12	lime	245	257
1	lime	150	151	7	shale	257	<u> 259</u>
17	shale	151	168	12	lime	259	<u> 271</u>
7	green lime	1.68	175	1	shale	271	<u> 272</u>
***				3	lime	272	<u> 275</u>

7	shale	275	282
23	lime	282	305
13	lime	310	323
3	shale	323	326
2	lime	326	328
114	shale	328	442
2	lime	442	444
26	shale	444	470
8	lime	470	478
10	shale	478	488
18	lime	488	506
11	mix	506	517
1	lime	517	518
<u>2 mo</u>	stly shale mix	<u>518</u>	520
32	shale	520	552
8	lime	_552	<u>560</u>
12	lime mix	560	572
12	lime	572	580
23 sh	ale mix	580	603
_5	lime	603	608
12	shale	608	620

4	coal	620	624
4	lime	624	628
2	oil lime	628	630
2	little oil	630	<u>632</u>
2	little oil Ilme	632	634
2	little oil	634	636
9	shale	636	645
10	lime	645	655
40	shale	655	704
_ 2	little sand	704	706
2	good	706	708
2	good	708	710
2	Rood	710	712
2	little	712	714
4	sand oil	714	718
40	shale	718	758
20	mix	758	778end
A - Company of the Co	4		



TICKET NUMBER LOCATION O XXawa . KIS FOREMAN Fred Made

DATE

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

FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER#	7	OI.	-IAICIA I			
, ,		And the second s	LL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/3//2 CUSTOMER	2579	Aloxano	Ler # BSI- AL-1	0 SW29	18		
			1	. 174474.20		21	.FR
MAILING ADDO	erity Res	OUVLES	duc	TRUCK#	DRIVER	The state of the s	
INVITING ADDR	(E23					TRUCK#	DRIVER
1097	05 6000	1.1.	N =	506	FreMad	Safety	nul.
CITY	15 Gran	STATE	ZIP CODE	495	Har Bec	14B of	2
	d Park		66210	369	Der Mas.	DM	
	ng String		4 45	558	Bre Man	13 m	
CASING DEPTH	/f	DRILL PIPE_	and the same of th	DEPTH 778	CASING SIZE & V	VEIGHT_278	EUE
SLURRY WEIGH						OTHER	
	AND DESCRIPTION OF THE PERSON	OLUKKI VOL_	WATE	R gal/sk	CEMENT LEFT in	CASING 2/2"	1/15
DISPLEMENT	1_9.97138C	DISPLACEMEN	IT PSI MIX P	SI			
REMARKS: 5	stablish	pump	rate Mix	+ Pump 100#	(1 -1 -		
							mp
_ C'eme	St to Su	v Face	Flush an	e times clea	et 2 Phino	Seal/SKI	•
ru66+	/ Plai 0	So coch	of the point	essure to	u. Displac	e 2/2"	language and the same and the s
DVess	ive for	30 M S	Rilarda	essure to.	500 F PS).	Hold & Mo	uitor
Sho	Ym Cas	<u> </u>	Mease	IVESSURE to.	sex float	Value.	
<u> </u>	rive cas	ING.					
: \]	TC Drill	Su					
IV		9					
				,	- Fruil	Made	
ACCOUNT							. ,
CODE	QUANITY o	r UNITS	DESCRIPT	ION of SCOVICEO - DOG		I	

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRO	DUCT	UNIT PRICE	
5401	1	PUMP CHARGE	,	OMITAGE	TOTAL
5406	20 mi	MILEAGE	.475		103000
5402	7<9		495	880	78230
5409	1/2 minimum	Cas My footage		·	N/e
		Ton Moles	558		17500
<u> </u>	, 2hrs	80 BBL Vac Truck	369		18000
					-
1127	109 s/cs	70/30 Por Mix Cement			138430
11188	292#	Premion Gel			-/38/30
1111	221#	Granulated Salt			6/32
1107 A	55*	Pheno Scal			81 77
4402	1	2/2" Rubber Plug			70 95
		2 / CO - 3 C / () ()			2800
					;
					1
					1:
lavin 3737	170		7-8%	SALES TAX	12683
		₹·	• .	ESTIMATED	2001
AUTHORIZTION		TITLE	r	TOTAL L	-3048 · 19

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