

Kansas Corporation Commission Oil & Gas Conservation Division

1127981

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.):	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?
Operator:	
Well Name:	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:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec Twp S. 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

1127981

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.)		Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
		AI	DDITIONAL	CEMENTIN	G / SQUE	EZE RECORD				
Purpose: — Perforate — Protect Casing — Plug Back TD — Plug Off Zone Depth Top Bottom Type of Cement			ement	# Sacks	Used		Type and	Percent Additives		
Shots Per Foot	Per Foot PERFORATION RECORD - Bridge Plug Specify Footage of Each Interval Per			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)			



oil

DATE

3.19-13

Gridler

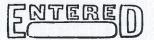
CASING DEPTH 44/

DISPLACEMENT 24

SLURRY WEIGHT

MAILING ADDRESS

CUSTOMER



TICKET NUMBER LOCATION Eureka

FOREMAN STEW When

FIELD TICKET & TREATMENT REPORT PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676 A7 T

Lieter. Mix 40 SKs Class A Cement W/ 2% Cocle 2% Cel

Job Complete Rix down

5-031-23492 CEMENT **CUSTOMER#** WELL NAME & NUMBER SECTION TOWNSHIP RANGE COUNTY Vannocker #9 12 14E Coffey 73 TRUCK# DRIVER TRUCK# DRIVER 485 Alan m. 479 Allen B ZIP CODE JOB TYPE Surface O HOLE SIZE_ HOLE DEPTH 4/2/ CASING SIZE & WEIGHT S **DRILL PIPE** TUBING **OTHER SLURRY VOL** WATER gal/sk **CEMENT LEFT in CASING** DISPLACEMENT PSI MIX PSI RATE REMARKS: Safty Meeting Rix up To 8 % Casing.

Thank You

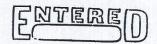
234 bbs Fresh water. Shutwell in Good Cement Returns To surface

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	-	PUMP CHARGE	823.00	825.00
5486	45	MILEAGE		180.00
11045	405ks	Class A Cement	14.95	598.00
1102	100#	Cacla 2%	.74	74.00
111813	100°	Gel 2%	.21	_21.00
5407	1.88	Ton Mileage Balk Truck	mys	350.00
•				
				0-40-5
		विद्यालय 6-3%	SALES TAX	2048.00 _43.65
avin 3737 AUTHORIZTION	B. Huns	TITLE Tool pusher	ESTIMATED TOTAL DATE	2001.65

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.

SECRET SECULORIST .





LOCATION Suceka

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

FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER#	WELL NAME & NUM	CEME				
			BER	SECTION	TOWNSHIP	RANGE	COUNTY
3-22-13	4418	Vannacker #9		12	23	146	Coffer
CUSTOMER							icol r cr
MAILING ADDRE	011 12c			TRUCK#	DRIVER	TRUCK#	DRIVER
				485	Alan m		
434 71	ris Rd Sw			667	ChrisB		35422 1462
CITY		STATE ZIP CODE		479	Allen 13		
Gridley		Ks 66852					Alternative Walter
JOB TYPE Long	sicing O	HOLE SIZE 1 74	HOLE DEPTH		CASING SIZE & V	VEICUT 414	10 18 11-1
			TUBING		CASING SIZE & V		10.2 . Well
			TODING			OTHER	
OLOIGIT WEIGH	222011	SLURRY VOL	Rump	k	CEMENT LEFT in	CASING	
DISPLACEMENT	25.30 bys	SLURRY VOL	MIX PSI DUL	11007	RATE		
REMARAS: Sal	TY Mesting	1 Kic 0070 4'5 cas	inc 1300	attireulati	Our Our	C111	C 12'4
150sks 69/2	to pozmin	(smen) W/ 8%6el	1 = Phon	n ceal more	(で:) 、	17h 2001	11.1.
SET CEMENT	WISTK	ol-Seal garlik . Grash	Teve	112	1 - 1	211 2038	SINICK
Disales	1 with 28	20 112 Cook # 50	C LO	1× 211125 . 31	DAN GOMY	Ralease &	Mug.
enspeace	Die At	30 Lls Fresh wover	Pinalpo	rubing bus	ssure 600	* Bump	Drug
1100-	Jail Amin	Bekelle Prossure	Plus	hold. G	God Ceme	of Retur	15 70
PiT. 15	b) slucey.	Jab Complet	Ried	awa			
							DOTAL MARKET
		Thank	oU				

QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
	PUMP CHARGE	1030 00	1030,00
415	MILEAGE	4.00	180.00
150sks	60/40 POZ MIX Cement	12.55	1882.50
1032#			216.72
1504			193.50
Sosks			960.00
350t	Kol-Seat 5" por/sk	100 mary 200 44 65 mary	115.00
9.2	Tonmikase Bulkiruck	1.34	554.76
_3	Centralizer 4/2	42.00	126.00
1	4'z Float Shoe AFM		286.00
<u> </u>	4'z Tup Rubber plug	45.00	45,00
		Subjotal	5589.48
	6.3%	SALES TAX	240.91
Y N	1_11 251608	ESTIMATED TOTAL	5830.4F
	1 4/5 /50sks /032# /50* 50sks 250t	PUMP CHARGE 4/5 MILEAGE /50sks 60/40 POR MIX CEMENT /632# 6el 8% Phenoseal 1* par/sk Sosks Thick sat cament 70il 75ot Mol-Seal 5* par/sk 9.2 Ton Mikase Bulk Truck 4/2 Float Shae AFU 4/2 Top Rubber plug 6.3%	PUMP CHARGE

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.