

Kansas Corporation Commission Oil & Gas Conservation Division

1128357

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 🗌 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 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 Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #: SWD Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name: License #: Quarter Sec Twp S. R East West
ENHR Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or	. 5
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

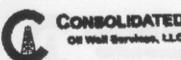


Operator Name:			Lease Name: _			_ Well #:	
Sec Twp	S. R	East West	County:				
time tool open and cle recovery, and flow rate	osed, flowing and shu	nd base of formations pe at-in pressures, whether est, along with final chart well site report.	shut-in pressure rea	ched static level,	hydrostatic press	sures, bottom h	nole temperature, fluid
Drill Stem Tests Take		☐ Yes ☐ No		og Formatio	n (Top), Depth ar	nd Datum	Sample
Samples Sent to Geo	ological Survev	☐ Yes ☐ No	Nam	ne		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Cop	ed Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
			RECORD No-	ew Used ermediate, producti	ion, 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 / SQI	JEEZE RECORD	I.		
Purpose: —— Perforate —— Protect Casing	Purpose: Depth Type of Ce		# Sacks Used		Type and I	Percent Additives	
—— Plug Back TD —— Plug Off Zone							
Shots Per Foot	PERFORATI Specify	ON RECORD - Bridge Plu Footage of Each Interval Pe	gs Set/Type rforated		cture, Shot, Cemen mount and Kind of Ma		d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	IHR. Producing Me		Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wat	ter B	bls.	Gas-Oil Ratio	Gravity
DISPOSITI	ION OF GAS:		METHOD OF COMPL	_		PRODUCTIO	ON INTERVAL:
Vented Sol	d Used on Lease	Open Hole	Perf. Dually (Submit		mmingled mit ACO-4)		

Operator License #: 31955	API #: 15-207-28452-00-00		
Operator: Mark Oil, Inc	Lease: Albert-Lair		
Address: 21825 Greenwood Rd Chanute, KS 66720	Well #: 08-12		
Phone: 620-431-3002	Spud Date: 12/10/12 Completed: 12/12/12		
Contractor License: 32079	Location: SE-NW-NW-NE of 8-24-17E		
T.D.: 1283 T.D. of Pipe: 1280 Size: 27/8"	700 Feet From North		
Surface Pipe Size: 7" Depth: 40'	2220 Feet From East		
Kind of Well: Oil	County: Woodson		

LOG

Thickness	Strata	From	То	Thickness	Strata	From	То
21	Soil & Clay	0	21	2	Lime	834	836
9	Sand & Gravel	21	30	38	Shale	836	874
48	Lime	30	78	2	Lime	874	876
81	Shale	78	159	3	Shale	876	879
129	Lime	159	288	2	Lime	879	881
60	Shale	288	348	13	Oil Sand	881	894
6	Lime	348	354	307	Shale	864	1201
13	Shale	354	367	1	Coal	1201	1202
64	Lime	367	431	13	Dark Shale	1202	1215
4	Shale	431	435	15	Sand and Shale	1215	1230
3	Black Shale	435	438	5	Lime	1230	1235
44	Lime	438	462	7	Lime/Oil/Bleed	1235	1242
3	Black Shale	462	465	41	Broken Lime	1242	1283
25	Lime	465	490				
148	Shale	490	638				
4	Lime	638	642				
18	Shale	642	660				
4	Lime	660	664				
11	Shale	664	675				
10	Lime	675	685				
67	Shale	685	752				
2	Lime	752	754				
8	Shale	754	762	17			
3	Lime	762	765				
12	Shale	765	777		T.D.		1283
2	Lime	777	779		T.D. of pipe		1280
18	Shale	779	797				
23	Lime	797	820				
14	Shale	820	834				



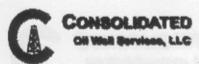
FNTERE

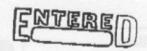
LOCATION CAS SAND

	800-467-8676	20 FIE		CEME	VT APT 1	3-267-284 TOWNSHIP	RANGE	COUNTY
DATE	CUSTOMER#	WEL	L NAME & NUM	IIDLIN	SECTION	TOWNSHIP		
2-10-12	5340	ALBANT	-Lair	8-12	8	245	17E	voodson
ISTOMER					TRUCK#	DRIVER	TRUCK#	· DRIVER
Mar	Roil	114_		0/0/20	485	Blun m.		
ALING ADDRES	24.				313	marle		II.
P.O. B	0X5/1	STATE	ZIP CODE	-	3.5			
		Ks	66730		5.50.50	Andreas Commission		
hanut	Face O	HOLE SIZE_		HOLE DEP	TH 35'	CASING SIZE & V	VEIGHT_7"	
SING DEPTH		DRILL PIPE	1 -8	TUBING	32-30-	13	OTHER	
URRY WEIGHT		SLURRY VOL		WATER gal	/sk	CEMENT LEFT In	CASING	
			UT DEL	190 VIII		RATE		
MADVE	Con and and	and Ore	.0 To 7	" cosina	Brack CH	per/sk.	Ly Frash 2	voter.
	37053007		000 W1.W1.			1-99	023-00	925.
ACCOUNT	OUANITY	or UNITS	T	DESCRIPTION	of SERVICES or P	RODUCT	UNIT PRICE	TOTAL
CODE			PUMP CHAI	RGE			825.00	823.00
84015	/		MILEAGE	1011			60 01 00 00	00000
5406	470		MICHAGE				400	120.00
								180.00
	110.12		Class	Cemen				598.00
11045	405%	<i>y</i>	-	Camen			400	598.00 55.50
1102	75\$		220	Getiz			14.95	598.00 55.50
1102	75 [#]		2%	Getiz			14.95	598.00 55.50
1102	75\$		2%	Getiz			14.95	598.00 55.50 15.70 51.60
1102 114B 1107A	75 [#]		2% 12 ps	Getiz Gel Iano Seo			14.95	598.00 55.50
1102 1118B 1107A	75 [#] 75 [#] 40 [#]		2% 12 ps	Getiz Gel Iano Seo	pos/slk		14.95	598.00 55.50 15.70 51.60
1102 1118B 1107A	75 [#] 75 [#] 40 [#]		2% 12 ps	Getiz Gel Iano Seo	pos/slk		14.95	598.00 55.50 15.70 51.60
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1102	75 [#] 75 [#] 40 [#]		2% 12 ps	Getiz Gel Iano Seo	pos/slk		14.95 .74 .21 1.29	598.00 55.50 15.70 51.60
1102 1118B 1107A	75 [#] 75 [#] 40 [#]		2% 12 ps	Getiz Gel Iano Seo	pos/slk	7.3%	14.95	598.00 55.50 15.70 51.60 350.00

AUTHORIZTION (Control of the form of the form of the customer's lacknowledge 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.

TITLE





38367 TICKET NUMBER LOCATION Eurato FOREMAN STELLE ANCOL

PO Box 884, Chanute, KS 66720 620 421-0210 or 800-467-9676

FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER#	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
12-12-12	5350	Albert	Albert-lair #8-12		8	245	178	Greeker
Mar H	coil Inc.				TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDR	RESS	8/2012	Teams	0/80,8	485	Alanm	200	
P.o. 1	30x 511	- and second			667	Chrisa	-27.00000	
CITY		STATE	ZIP CODE		637	marle		
Chanu	nesticiny o	HOLE SIZE	58%	HOLE DEP	TH /284'	CASING SIZE & V	VEIGHT	
ASING DEPTI	1280'	DRILL PIPE		TUBING	The second secon		OTHER	
		SLURRY VOI		WATER gal	/sk	CEMENT LEFT In	CASING	
DISPLACEMEN	T.7.4666	DISPLACEMI	ENT PSI 500	MIX POI DI	lsk_ lux /200*	RATE		
REMARKS: 5	afty Mee	Ting: R	is up To	2787	whing 13	reals circ	ulation	W/5
bbls tras	& water	Pump 30	00 = Gre/ F	lush, x	5 bhls wo	Her Spacer	· Anix	1505KS
JUC C	EMENT W	1100	henoseals	28/SK,	Shut down	work out	pump +	Lines
STUFF 2	plus . D	isplace	with 24	bbls FI	nesh water	Final 2	mping	Pressure
South B	mp Plus	/200 th.	Bleed Pre	sure du	WN TO 300	* Shurwe	llin. G	رمول
To most	R-JUST TO	surface.	1. hb/1 = 2	יכנם סוד.	Johlama	1878 Rig do	MAILY	

Thank you

CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	40	MILEAGE	4.00	160,00
1/26	150 5Ks	GWC CRITISHET	18.80	2820.00
1107A	1505	Phanosed 1 = Des/sk	1.29	/93.50
nikB	3000	Gel Flush	21	63.00
5407A	7.8	Formikage BWR Truck	1.34	418.08
5502C	340	80 bb) Vacuum Truck	90.00	270.00
1123	Bacosallens	Craywater	18.30/1000	49.50
4402	. 2	23/8 Top Rubber Plugs	28.00	56.00
	93.98 (\$10 Exercises	1 190 2001 000 000 000 000 000 000 000 000 0	0.0	0424197
ubles spacemen	On Resetta		SubTotal_	5060.08
		7.3%_	SALES TAX	23227
avin 3737	1 Ophis I	966436	TOTAL	5297.37

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.