

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1137280

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:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from Cast / 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:
	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? Yes No
OG GSW Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Fluid Management Dian
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Oblasida sectori
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Chloride content: ppm Fluid volume: bbls
Conv. to GSW	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 #:	
ENHR Permit #:	Quarter Sec Twp S. R East West
GSW Permit #:	County: Permit #:
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	1137280
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 Sheets)		Yes No		Log Formation (Top), Depth			Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	16		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted B (If no, Submit Copy)	Electronically	<pre>Yes □ No Yes □ No Yes □ No</pre>					
List All E. Logs Run:							
		CASIN	G RECORD	ew Used			
		Report all strings se	t-conductor, surface, int	ermediate, 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

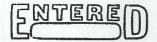
ADDITIONAL CEMENTING / SQUEEZE RECORD

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/Type Specify Footage of Each Interval Perforated					Depth				
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed Production, SWD or ENH			λ .	Producing N	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:				METHOD OF COMPLE			TION:		PRODUCTION INT	ERVAL:
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit)	Comp. ACO-5)	Commingled (Submit ACO-4)		
(If vented, Sub	omit ACC)-18.)		Other (Specify)						

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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	CONSOLIDATED
	Qii Wali Services, LLC



TICKET NUMBER 41152 LOCATION EUCERA FOREMAN RICK Leaford

PO Box 884, 0	Cha	nute, l	(S	66720
620-431-9210	or	800-4	67-	8676

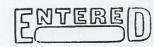
FIELD TICKET & TREATMENT REPORT CEMENT ADT# 15-049-72525

020 401 0210			AP1 /3-017-223.5				
DATE	CUSTOMER #	WELL NAME & NU	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-7-13	4763	Ourbin Dorth "	2	3	315	108	EIK
CUSTOMER .				In the second dataset	and the second second		No. Contraction
L	one Wol	f Oil Ca.	CtG	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDR	ESS		Dris	520 75	John		
P.	0. Box 24	1		611 TL	Joey		
CITY		STATE ZIP CODE					
No	line	16 67353					
JOB TYPE 30	(face 0	HOLE SIZE /21/4"	HOLE DEPTH	42'	CASING SIZE & W	EIGHT 85/2	
1.00	42' 6.2.	DRILL PIPE				OTHER	
	IT 15*	SLURRY VOL 10 BL	WATER gal/sl	6.5	CEMENT LEFT in	CASING 5'	
		DISPLACEMENT PSI			RATE		
REMARKS:	afety meetic	19- Rig up to 85/	" Casina .	Break Curcula	tion I fre	sh water.	Dired
46 343	s class A	comet w/ 300	Coll2 + 2"	Do all C	5#/gal. D	isplace up	23/4 BBI
1 30 40.	shit cause	in my good cement	ceturos to	surface To	h complete k	la damai	
	PUNI CHARTA	, my jasa canete	- i section - sec			,	

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PROD	ООСТ	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE		825.00	825.00
Stol	40	MILEAGE		4.00	160.00
11045	45	Class A cenut		14.95	672.75
11 02	125*	300 6000		.74	92.50
11188	85 #	270 301		.21	17.85
5407		Con mileage bulk tok		mic	350.00
	1		*	· · ·	
	1				
			·		
			*** **		
	No.				-
				Subtatel	2118.10
	, /		7.390	SALES TAX	57.16
Ravin 3737	K- MCC By Rob WOLFE	855854		ESTIMATED TOTAL	2175. De
AUTHORIZTION	By Rob Wolfe	TITLE Owner		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.





TICKET NUMBER 41155 LOCATION ELVERA

FOREMAN RICK Ledford

Cent. m it 2 4. 6. 8. 14

DATE

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

FIELD TICKET & TREATMENT REPORT CEMENT APT # 15-149-22525

DATE	CUSTOMER #	N	ELL NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY	
1-10-13	4763	North	Durbin # 2		3	315	106	EIK	
CUSTOMER				C+G		EXPLANATION OF			
La	ne Wolf	Oil Co.		0,19	TRUCK #	DRIVER	TRUCK #	DRIVER	
MAILING ADDR	ESS				520	John 75			
Bo	x 241				467 1	Chris B. d	8		
CITY		STATE	ZIP CODE		515 1	Mule M	R		
No	line	KS	67353	I [
JOB TYPE	15 0	HOLE SIZE	77/8"	HOLE DEPTH	2150'	CASING SIZE & W	EIGHT 51/2"	15.5#100	
CASING DEPTH	1 2146	DRILL PIPE		TUBING			OTHER		
SLURRY WEIGI	HT/262/3.6#	SLURRY VO	L 95 BDI	WATER gal/sk	8.0.9.0	CEMENT LEFT in	CASING 3		
DISPLACEMEN	TSI Bbi	DISPLACEN	ENT PSI 1000	PSI / 500	Bung plug	RATE			
REMARKS: 5	afety meet	sing - Ri	4 40 5/2	"casing.	Break CICO	letion 1/10	(ab) fresh	water.	
Mixed 2	210 SKS LO	140 9020	nix comment in	180 91 +	1 # ahenaso))	W @ 12.6* /9	al. yield 1.	De. Tail	
in w/100 ses thickest const w/ 5" Kol-seel + 1" phenosol/se @ 13.4"/gal. yield 1.25 washart pump + lines, release latch down plug. Displace w/ 51 Bbi fresh water. Final pump pressure 1000									
PSI. Bung	PSI. Bung plug to 1500 PSI. release pressure, floort + plug held. Good cement returns to								
			it. Job can						

Plugged (albele w/ 20 5×5

" Thank Ya"

ACCOUNT **QUANITY or UNITS DESCRIPTION of SERVICES or PRODUCT** UNIT PRICE TOTAL CODE 5401 1 PUMP CHARGE 1030.00 1030.00 MILEAGE 40 4.00 160.00 5406 230 545 12.55 2886.50 1131 60/40 Pozmix cement lead cent 870 gel .21 331.80 1580# 11198 236# 1.29 296.70 1 # phonosol / SH 1107A thickset cennt 19.20 1920.00 100 545 1126A 5# 1601-seal JSH 500# 230.00 LUOA .46 1# phenesee) /s# 100 + 1.29 129.00 1107A 15:39 1.34 824.90 ton mileage buck trus SHOTA 512" y 72/8" centralizes 5 48.00 240.00 4130 5%" AFU float shee 344.00 344.00 4159 51/2" later down plug 254.00 2.54.00 4454 8646.90 Sistita) 732 SALES TAX 484.13 Bavin 3737 ESTIMATED - M4 255800 9131.03 TOTAL TITLE OWNER

AUTHORIZTION witnessed by Rob Wolfe

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.