

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1139267

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 East / 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:
<b>U</b>	
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	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 Disp
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	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 #:	
SWD Permit #:	Lease Name: License #:
ENHR         Permit #:	Quarter Sec TwpS. R East West
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	1139267
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		-	n (Top), Depth an		Sample	
Samples Sent to Geolog	ical Survey	Yes No	Nam	e		Тор	Datum	
Cores Taken Electric Log Run Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>		<ul> <li>☐ Yes</li> <li>☐ No</li> <li>☐ Yes</li> <li>☐ No</li> <li>☐ Yes</li> <li>☐ No</li> </ul>						
List All E. Logs Run:								
		CASING	RECORD Ne	ew Used				
		Report all strings set-	conductor, surface, inte	ermediate, product	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	

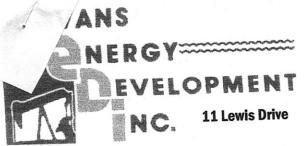
#### ADDITIONAL CEMENTING / SQUEEZE RECORD

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					e			ement Squeeze Record of Material Used)	Depth
TUBING RECORD: Size: Set At:				Packer	At:	Liner R	un:	No		
Date of First, Resumed Production, SWD or ENHF		<b>λ</b> .	Producing M	lethod:	oing	Gas Lift	Other (Explain)			
Estimated Production Oil Bbls. Per 24 Hours		Gas Mcf Wate		ər	Bbls.	Gas-Oil Ratio	Gravity			
									1	
DISPOSITION OF GAS:					METHOD OF COMPLETION: PRODUCTION INTE			TERVAL:		
Vented Sold Used on Lease				Open Hole	Perf.	Dually (Submit A		Commingled (Submit ACO-4)		
(If vented, Submit	ACO-	18.)		Other (Specify)						

1								
R	CONSOLID	ATED				TICKET NUM	BER 3	5108
	Qil Well Service					LOCATION		
						FOREMAN	- ALLEN ALLE	l l
PO Box 884, 0	Chanute, KS 6672	20 FIE	LD TICKE	T & TREA	TMENT RE	PORT	- A RUN	ay
	or 800-467-8676			CEME	T			ļ
DATE	CUSTOMER #	WEL	L NAME & NUN	IBER	SECTION	TOWNSHIP	RANGE	COUNTY
UŞTOMER	4448	Guttern	nav # Ki	3-13	NE 19	14	22	10
	Rosource Ex.	ot Dou			TDUOK#	and the second sec		
AILING ADDR	RESS	PEO		-	TRUCK#	DRIVER	TRUCK#	DRIVER
9393	W 110th .	S.	site Soc		481	Casken	V Safer	y Keeting
ITY		STATE	ZIP CODE	-	Leldo 503	Car Map	V	
Buerland	d Park	KS	66210		370	Landel hall	V	
OB TYPE 10		HOLE SIZE	55/8"	L HOLE DEPT		CASING SIZE &	IV	1
ASING DEPTH	1-896	DRILL PIPE		TUBING		CASING SIZE &	OTHER	" EUE
LURRY WEIGH		SLURRY VOL_		WATER gal/s	sk	CEMENT LEFT in		,
SPLACEMEN	T.5,19665 1	DISPLACEMEN	T PSI	MIX PSI		RATE 4.5		
EMARKS: he	Id safety a	recting	establish	ed circo	lation mi	1 ,	1	+ P.
ool falle	owed by	10 6HS	freshive	A	xed + ev	mped 14/1	The av	O # Memic
ment	w/ 276	cel + 1	s# Phe	nospal	per ste	cement.		0 Poznik
mp dec	u pompeo	1 2 2%	s" rubber	plugs			to surtai	e, Hudsec
ater, pr	ressured to	, 800	PSI, rel		rossure	111	casing.	fresh
74			/	6			-using	<u> </u>
				1				
10001117								-/
ACCOUNT CODE	QUANITY O	r UNITS	DE	SCRIPTION of	SERVICES or PRO	DUCT	UNIT PRICE	TOTAL
5401	1		PUMP CHARGE	1				1030 00
5406	30 m		MILEAGE					row.
402	896'		Casing to	otace				120.00
7407	minimu	un	casing to	ilease				
502C	2 hs		80 Vac					350,00
								180.00
124	.146 sk	s	5%50 Pc	Auir r	au ent			1500-
118B	445 #	-	Premiur	A G . 0	en ell_			1598.70
107A	73 #	-	Dan	1 Der	1.			93.45
402			Phenose 21/2 "rul	al	· · · · · ·			94,17
			~12 rul	over plu	9			56.00
							19. 19. 19. 19. 19. 19. 19. 19. 19. 19.	8 8 N
1	······					م د م دل	2 m 4 m 1	и тил м тир (28 
						YEma	0.11	170
3737						7.525%	SALES TAX ESTIMATED	138.63
	1100	,	1.				TOTAL	3660.95
HORIZTION_	No Co. R.	p. an la	cation 1				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.



# Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083 Fax: 913-557-9084

WELL LOG Kansas Resource Exploration & Development, LLC Guetterman #KR-13 API # 15-091-23,935 November 7 - November 9, 2012

Paola, KS 66071

Thickness of Strata           13           14           4           12           15           10           5           12	Formation soil & clay shale lime shale lime shale lime shale	<b>Tota</b> 13 27 31 43 58 68 73 85	I
17 18	lime shale	102 120	
18 7	lime shale	138 145	
48 26	lime shale	193 219 224	(9) 1
5 2	lime shale lime	224 226 229	
3 14 7	shale lime	243 250	
9 11	shale lime	259 270	
3 2	shale lime shale	273 275 309	
34 7 5	lime shale	316 321	
10 11	lime shale	331 342	
20 4	lime shale	362 366 368	
2 7	lime shale	375	base of the Kansas City
6 173 9 10	lime shale lime shale	554 563 573	
12 11 3	lime shale lime	585 596 599	

## Guetterman #KR-13

<b>n</b> -		-	2	
	n	0		

45	shale	644 red	
2	lime	646	
23	shale	669	
1	broken sand	670 brown & green, no oil	
4	silty shale	674	
42	shale	716	
6	broken sand	722 brown & grey, ok bleeding, ma	king gas
4	oil sand	726 brown, good bleeding	
19	shale	745	
1	coal	746	
71	shale	817	
1	coal	818	
6	shale	824	
19	silty shale	843	
1.5	lime	844.5	
2	oil sand	846.5 brown, good bleeding	
2.5	broken sand	849 brown & green, ok bleeding	
4	silty shale	853	
53	shale	906 TD	

Drilled a 9 7/8" hole to 23.5' Drilled a 5 5/8" hole to 906'

Set 23.5' of 7" surface casing cemented with 6 sacks of cement

Set 896' of 2 7/8" 8 round upset tubing, with 3 centralizers, 1 float shoe, & 1 clamp.