

Kansas Corporation Commission Oil & Gas Conservation Division

1149765

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:	Sec Twp S. 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 ☐ 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?
If Workover/Re-entry: Old Well Info as follows:	·
Operator: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Conv. to ENHR	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 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.

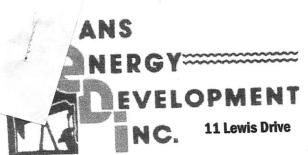
Submitted Electronically

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	/:					
INSTRUCTIONS: Show time tool open and close recovery, and flow rates ine Logs surveyed. Atta	ed, flowing and shut- if gas to surface tes	in pressures, whether t, along with final char	shut-in pres	sure reach	ed static level,	hydrostatic press	sures, bottom h	ole temper	ature, fluid
Orill Stem Tests Taken (Attach Additional Sh	eets)	Yes No		Log	Formation	n (Top), Depth an	d Datum	☐ Sa	ımple
Samples Sent to Geolog	•	☐ Yes ☐ No		Name			Тор	Da	atum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)		Yes No Yes No							
List All E. Logs Run:									
		CASING Report all strings se	G RECORD	New		on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Wei	ight	Setting Depth	Type of Cement	# Sacks Used		d Percent ditives
	Dillied	Set (III O.D.)	LDS.	/11.	Бериі	Cement	Osed	Auc	illives
		ADDITIONA	AL CEMENTI	NG / SQUE	EZE RECORD				
Purpose: Depth Top Bottom Perforate Protect Casing Plug Back TD		Type of Cement	# Sacks	s Used		Type and F	Percent Additives		
Plug Off Zone									
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated				cture, Shot, Cement nount and Kind of Ma		d	Depth	
TUBING RECORD:	Size:	Set At:	Packer A	At:	Liner Run:	Yes No			
Date of First, Resumed Pr	roduction, SWD or ENH	R. Producing Me	ethod:	ng G	as Lift	ther (Explain)			
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf	Water	Bk	ols. (Gas-Oil Ratio		Gravity
DISPOSITION	N OF GAS:		METHOD OF				PRODUCTIO	ON INTERVA	L:
Vented Sold	Used on Lease	Open Hole	Perf.	U Dually C (Submit AC		nmingled mit ACO-4)			
(If vented, Subm	nit ACO-18.)	Other (Specify)							



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

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

Paola, KS 66071

WELL LOG

Kansas Resource Exploration & Development, LLC
Guetterman #KRI-6
API # 15-091-23,953
January 31 - February 5, 2013

Thickness of Strata	<u>Formation</u>	Total
3	soil & clay	3
13	sandstone	16
33	shale	49
6	lime	55
4	shale	59
2	lime	61
7	shale	68
15	lime	83
8	shale	91
9	lime	100
8	shale	108
18	lime	126
19	shale	145
17	lime	162
7	shale	169
50	lime	219
25	shale	244
9	lime	253
17	shale	270
8	lime	278
7	shale	285
10	lime	295
5	shale	300
3	lime	303
20	shale	323
2	lime	325
9	shale	334
22	lime	356
9	shale	365
21	lime	386
4	shale	390
4	lime	394
2	shale	396
8	lime	404 base of the Kansas City
174	shale	578
6	lime	584
6	shale	590
1	coal	591

Guetterman #KRI-6		Page 2
6	shale	597
5	lime	602
2	shale	604
1	lime	605
15	shale	620
3	lime	623
3	shale	626
1	coal	627
9	shale	638
2	lime	640
23	shale	663
1	lime	664
4	shale	668
3	lime	671
69	shale	740
6	broken sand	746 brown & grey sand, fair bleeding (gassy)
2	oil sand	748 brown, ok bleeding (gassy)
18	shale	766
1	coal	767
30	shale	797
1	coal	798
64	shale	862
4.5	silty shale	866.5 white & limey
1.5	broken sand	868 brown sand with few thin lime seams good bleeding
1.5	oil sand	869.5 brown, good bleeding
2.5	broken sand	872 brown & grey, good bleeding
45	shale	917 TD

Drilled a 9 7/8" hole to 21' Drilled a 5 5/8" hole to 917'

Set 21' of 7" surface casing cemented with 6 sacks of cement

Set 902' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.



256709

•	
TICKET NUMBER	38716
LOCATION OHAW	a,KS
FOREMAN CAS	V. 0

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

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COLINE
2/12/13	4448	Guetterman # KRI-6	NE 19	14	20	COUNTY
CUSTOMER	Pos		12 - No. 14			1 00
MAILING ADDR	<u>es Resoure</u>	CXP T DRU	TRUCK#	DRIVER	TRUCK#	DRIVER
93931.) 110th , S.	.I. m	481	Casker	VSately	Heeting
CITY	7 110 7 32	STATE ZIP CODE	666	Gar Mag	~	
	nd Park	KS 66210	503	Dan Det	V	
OB TYPE 10			370 DEPTH 917'	Jas Ric	V	
ASING DEPTH	. / //	DRILL PIPETUBING		CASING SIZE &	WEIGHT_27	& EVE
LURRY WEIGH					OTHER	
		DISPLACEMENT PSI MIX PSI	gal/sk			
EMARKS: hal	A sofod um	coffice orderil - 1	1.1.	RATE 4.5	gor / D	
sel follo	wed by 10	esting, established circul	ation, mixed	+ pumped	100 # 17	emium
ement		bbls fresh water mis	sed + pumpe	d 150' skg	S 50/50 P	ozum'x
ilean a	14 20 12-27	el + 1/2 # Phenosoal 2" rubber plasto cas;	per x ceme	ut to sur	tace, thus	red puny
pressured -	to ROD PS	colored program and	mg / b w/ s	, 29 pplc .	tresh wat	ec,
100120	10 000 F-	I released pressures,	, snot in casin	1g		
				$\overline{}$	$\overline{}$	
				-/	77	
ACCOUNT	QUANITY	DESCRIPTION DESCRIPTION	ON of SERVICES or PR	DDUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE				
5406	30 m					1030,00
5402	902'					120-00
8407	Minimu	7				350.00
2205C	2 60				 	
	V. 2					180.00
1124	150:	sks 5/50 Poznix	COU. 01 +			11.110.5
1118B		# Premium Gel	cemen			1642, SC
1107A	7 5 #					73,92
4402	70 4	Phenosoal 2/2" rubber	duc			96.75
		W/3 Y JOHC	prigs		 	56.00
					•	
	0 1		•		Islad	*
	MI		,	P		
	111111				The state of the s	
	11					
	MAN			•	SALECTAV	140 "
					SALES TAX ESTIMATED	140.60
vin 3737	1/1/1/1/4					
vin 3737	LAHY	V			TOTAL	3689.86
лтно г іzтіом_	/ \ V	TITLE			TOTAL DATE	