

Kansas Corporation Commission Oil & Gas Conservation Division

1150447

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



Operator Name:				Lease I	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	":					
INSTRUCTIONS: Shitime tool open and clorecovery, and flow rate line Logs surveyed. A	sed, flowing and shues if gas to surface te	t-in pressures st, along with	s, whether so final chart(s	hut-in pres	sure read	ched static level,	hydrostatic press	sures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional S		Yes	☐ No			og Formatio	n (Top), Depth ar	nd Datum	;	Sample
Samples Sent to Geol	ogical Survey	Yes	No		Nam	е		Тор	[Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy		Yes Yes Yes	No No No							
List All E. Logs Run:										
		Report a		RECORD	Ne	w Used	ion, etc.			
Purpose of String	Size Hole Drilled	Size C Set (In		Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used		and Percent additives
			ADDITIONAL	CEMENTII	NG / SQL	 EEZE RECORD				
Purpose: Depth Type of Cement				# Sacks Used Type and Percent Additives						
Perforate Protect Casing	Top Bottom	71	1,72 21 22							
Plug Back TD Plug Off Zone										
Flug On Zone										
	PERFORATI	ON RECORD	- Bridge Plug	s Set/Type		Acid, Fra	cture, Shot, Cemen	t Saueeze Recor	d	
Shots Per Foot	Specify	Footage of Eac	h Interval Perf	forated	ated (Amount and Kind of Material Used)					Depth
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN	_	roducing Meth	nod:	ıg 🗌	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		ħ.	METHOD OF	COMPLE	TION:		PRODUCTION	ON INTER	VAL:
Vented Sold		Оре	n Hole	Perf.	Dually	Comp. Cor	nmingled			
(If vented, Sub			or (Specify)		(Submit A	ACO-5) (Sub	mit ACO-4)			

DRILL LOG

Operator License# 32834	API 15-121-29455-00-00			
Operator	Lease Name Griffith			
Address	Well # 2			
Contractor JTC Oil, Inc.	Spud Date 3/20/13 Cement 4/4/13			
Contractor License32834	Location of			
T.D. 640 T.D. of Pipe 616	feet from			
Surf. Pipe Size_7.25 _Depth 23'	feet from			
Kind of Well prod	County Miami			

Thickness	Strata	From	То	Thickness	Strata F	rom To
2	soil	0	2	26	lime	204-230
5	clay	2	7	9	black shale	230-239
83	shale	7	90	21	lime	239-260
20	lime	90	110	5	coal	260-265
17	shale	110	127	14	lime	265-279
2	lime	127	129	131	shale	279-411
15	shale	129	144	6	red bed	411-417
6	lime	144	150	24	shale	417-431
30	shale	150	180	2	sand	431-433 little
13	lime	180	193	3	oil sand	433-436 ok
11	shale	193	204	1	oil sand	436-437 ok

	15	lime	437-452
-	46	shale	452-498
·	9	lime	498-507
	13	shale	507-520
	3	lime	520-523
	12	black shale	523-535
	10	lime	535-545
	14	shale	545-559
	2	lime	559-561
	3	shale	561-564
	4	coal	564-568
	2	lime	568-570
	6	shale	570-576
	2	oil sand	576-578broken
-	2	oil sand	578-580 good
	2	oil sand	580-582 good
	2	oil sand	582-584 good
	2	oil sand	584-586broken
	54	shale	586-640



257858

LOCATION OHAWA KS
FOREMAN Fred Mader

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

Ravin 3737

AUTHORIZTION_/

FIELD TICKET & TREATMENT REPORT

620-431-9210	or 800-467-8676			CEMEN	T			
DATE	CUSTOMER#	WELL	. NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
4/4/13	4015	6:4:4	~ # 0	2	SW 16	17	22	mi
CUSTOMER	/	_						diguayi pileti. Der
MAILING ADDR	Coil	Inc	*	_	TRUCK#	DRIVER	TRUCK#	DRIVER
COLUMN ADDRESS & FOL	_				712	FreMad	Safety	mity
35688	Plum Cv	eek Rd	In core		495	HarBec	0	1
ICHY			ZIP CODE	ĺ	675	JasoRic		
Osaway	fomile	KS	66064		358	mikikaa		
JOB TYPE Lo	ng string	HOLE SIZE	6	_ HOLE DEPTH	640	CASING SIZE & W	/EIGHT <u> みり</u> を	EUF
CASING DEPTH	616	DRILL PIPE		_TUBING		· ·	OTHER	
SLURRY WEIGH	HT	SLURRY VOL_		WATER gal/s	k	CEMENT LEFT In	CASING <u>2を</u>	Plug
DISPLACEMEN	T_3.57	DISPLACEMEN	T PSI	MIX PSI		RATE SBPM		<i>d</i>
REMARKS: /	old crew	met m	Estab	11sh pun	o rate N	1xx Pomp	100 # Gel F	lush.
Mix	* Pump	43 SAS		Comen		at to Su		
Quan,	ax Imes	clean.	Displac	e 2/2"	Rubber of	ug to cas.	Me TO.	
177	sole to	800 # PSI	Relea	se dre	ssure 4	Set floo		
Shu		25Nmg.		,				
		- 0				9,		
					3	1	1,000	
	TC DI	11/20			·····	Ful VI	ralin	
	,	5						
ACCOUNT CODE	QUANITY	or UNITS	D	ESCRIPTION of	SERVICES or PR	ODUCT	UNIT PRICE	TOTAL
5401		,	PUMP CHARG	GE		495		103000
5406		`	MILEAGE					N/C
5402	6	16	Casix	End	loge			NIC
5407	1/2 Mini		Ton	Miles	7	558		175 =
	,2,11,11	12hr	80 8		Truck	675		775
5502C		1.2 KV	000	NO VAC	todeje	0/3		13500
	-							
1126		83 SKJ	DWC	Cement				156040
111813		100#	0		1			2100
	 	700	TYEMI	11	7,			- 00
4402			22 Kg	von Gel	luc			2800
		• • • • • • • • • • • • • • • • • • • •			<i>V</i>		-	
	 							
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					** ***		enmi	
							JUNIP	W W W

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

TITLE_

7.55%

SALES TAX

ESTIMATED TOTAL

DATE



257858

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CUSTOMER	/	_						diguayi pileti. Der
MAILING ADDR	Coil	Inc	*	_	TRUCK#	DRIVER	TRUCK#	DRIVER
COLUMN ADDRESS & FOL	_				712	FreMad	Safety	mity
35688	Plum Cv	eek Rd	IND CODE	-	495	HarBec	0	1
ICHY			ZIP CODE	ĺ	675	JasoRic		
Osaway	fomile	KS	66064		358	mikikaa		
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Quan,	ax Imes	clean.	Displac	e 2/2"	Rubber of	ug to cas.	Me TO.	
177	sole to	800 # PSI	Relea	se dre	ssure 4	Set floo		
Shu		25Nmg.		,				
		- 0				9,		
					3	1	1,000	
	TC DI	11/20			·····	Ful VI	ralin	
	,	5						
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	,2 ,,,,,,	12hr	80 8		Truck	675		775
5502C		1.2 KV	000	NO VAC	todeje	0/3		13500
	-							
1126		83 SKJ	DWC	Cement				156040
111813		100#	0		1			2100
	 	700	TYEMI	11	7,			- 00
4402			22 Kg	von Gel	luc			2800
		• • • • • • • • • • • • • • • • • • • •			<i>V</i>		-	
	 							
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