

Kansas Corporation Commission Oil & Gas Conservation Division

150997

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? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: sx cmt
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 III Approved by: Date:

Side Two



Operator Name:			Lease Name: _			_ Well #:	
Sec Twp	S. R	East West	County:				
time tool open and cl	osed, flowing and shu es if gas to surface te	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	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
		ADDITIONA	L CEMENTING / SQI	JEEZE RECORD	1		
D. II		Type of Cement	# Sacks Used	Type and 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	Set/Type Acid, Fracture, Shot, Cement Squeeze Recorrated (Amount and Kind of Material Used)			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	er B	bls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:		METHOD OF COMPL	_		PRODUCTIO	ON INTERVAL:
Vented Sol	d Used on Lease	Open Hole	Perf. Dually (Submit		mit ACO-4)		

DRILL LOG

Operat	or License # _	3283	34	API#	15-121-29475-00	-00	
Operat	or <u>JTC Oil,</u>	lnc.			Lease NameGri	ffith	
Addres	s <u>P. O. Box 2</u>	4386			Well # I-1		***************************************
	Stanley, KS	6628	33				
Contra	ctor JTC Oil,	Inc.			Spud Date <u>6/11/1</u>	<u>.3</u> Cem	ent_6/14/13
Contra	ctor License	32834	1	Locat	ion of		s
T.D6	560 T.D. of	Pipe_6	529		feet	from	
Surf. Pi	pe Size <u>7"</u> I	Depth	20'		feet	from	
Kind of	Well <u>Inject</u>	tor		Coun	ty <u>Miami</u>		
Thicknes	ss Strata	From	То	Thickr	ness Strata	From	То
4	Dirt	0	4	31	Lime	205	236
11	Sandstone	4	15	6	Black Shale	236	242
76	Shale	15	91	21	Lime	242	263
17	Lime	91	108	5	Black Shale	263	268
9	Shale	108	117	3	Lime	268	271
<u>15</u>	Sand/No Oi	117	132	2	Shale	271	273
13	Shale	132	145	5	Lime	273	278
7	Lime	145	152	4	Shale	278	282
29	Shale	152	181	2	Lime	282	284
<u>15</u>	Lime	181	196	19	Shale/Little Sand	284	303
9	Shale	196	205	2	Shale	303	305

	33	Sandy Shale/No Oi	305	338	
	79	Shale	338	417	
	1	Sand/Tiny Oil	417	418	
	5	Sand	418	423	
	16	Sand Mix	423	439	
	3	Sand	439	442	Good
	2	Tiny	442	444	
	12	Lime	444	456	
	19	Shale Mix	456	475	
	5	Sandy Shale	475	480	
	23	Shale	480	503	
	2	Coal	503	505	
	8	Lime	505	<u>513</u>	
	12	Shale	513	<u>525</u>	
And the second s	3	Lime	525	528	
	11	Black Shale	528	539	
	1	Lime	539	540	
	2	Shale	540	542	
The state of the s	6	Lime	542	548	
	2	Shale Mix	548	<u>570</u>	
	5	Lime Mix	570	575	
	9	Cored	575	<u>584</u>	
	7	Oil/Sand	584	<u>591</u>	
	2	Shale/Tiny Oil	591	593	

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259684

TICKET NUMBER 42011	
LOCATION 0 x tawa KS	
FOREMAN E I MA (.	

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	COUNTY
6 14 13 CUSTOMER	4015	Gr: ff: +1	5 F.1	NW 21	17	23	M1
	TO Oil	Tue		TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	TC oil	S. AA.		7.2	Fremad		
3<1	as Plan	Creek R	,	495	Har Bec		-
CITY	88 Plum	STATE	ZIP CODE	369	Dar Mas		
Ogama	0 - 11 -	KS	66064	548	MikHaa	, , , , , , , , , , , , , , , , , , , ,	
JOB TYPE Lo		HOLE SIZE		H_ 660		EIGHT 27- /	FUE
CASING DEPTH	d - 1	DRILL PIPE				OTHER	
	<i>6&7</i>	SLURRY VOL_		sk			11.
			T PSI MIX PSI		RATE SAPA	N	19
DEMARKS	1100	NA ALL	7.75 IMIX 1 51	. 7 m)
MEMARKS: No	da Grent A	93 Aug	stablish pump	Vale. VIII	1 100 to	12/10g	/
X	* Fump	75 9125	OWC Coment	741 Dull	- Olive to	co, 214	
Lamb	4 1,700	con # an	1. Displace Hold + Ma	Z/Z KUSIA	er prog to	casing 1	>
Press	uno to	500 " NSI	14019 + MV	1 tov pro	SSUVE TO	r ga m	M
		ase pre	ssure to sax	Troop Va	alve. Sh	a) in	
Cas	~ L						
	<u> </u>						÷
	10. 5.7	1.			100		
	re Dril			7	and Mad	lu.	
ACCOUNT	QUANITY	or UNITS	DESCRIPTION	of SERVICES or PR	RODUCT	UNIT PRICE	TOTAL
5401]	PUMP CHARGE		495		108500
5406		2 25	MILEAGE		495		10500
5402		629'	Casing Fook	aae		1	NC
5707	Minim		Ton Wiles	<i>y</i> -	548		368-
5502C	77,7	2 hrs	SOBBL Vac 7	ruck.	369		16000
33020		~ n v >	80 DC VAP.	7002	3 6.7		
1126		93 5KS	owe cement	t a militar de la compania del compania de la compania del compania de la compania del la compania de la compan			183675
1118 B		100#	Promium Gel				720
4402		1	25" Rubbay 1	Plus		4	25.50
					ggs broke, be strop	on Rayers ago.	4
						20 1 1 g	
					The De-		142 56
Ravin 3737					and a second	SALES TAX ESTIMATED	
Ravin 3737	0 · R				The De-	SALES TAX	142 56 3768 81

account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.