

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1150780

Form ACO-1
August 2013
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.	TwpS. R	East _ West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84	
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used:_		
SWD			Location of fluid disposal if	hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East West
Recompletion Date		Recompletion Date	County:	Permit #:	

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					
Confidentiality Requested					
Date:					
Confidential Release Date:					
Wireline Log Received					
Geologist Report Received					
UIC Distribution					
ALT I II Approved by: Date:					

Page Two



Operator Name:				_ Lease l	Name: _			Well #:		
Sec Twp	S. R	East V	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	itic pressures, bot d.	tom hole temp	erature, flui	d recovery,
Final Radioactivity Lo- files must be submitte						gs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log
Drill Stem Tests Taker (Attach Additional S		Yes	No				on (Top), Depth ar			mple
Samples Sent to Geo	logical Survey	Yes	☐ No		Nam	e		Тор	Da	tum
Cores Taken Electric Log Run		☐ Yes ☐ Yes	☐ No ☐ No							
List All E. Logs Run:										
			CASING		☐ Ne					
	0: 11-1-	· ·				ermediate, product		// OI	T	d Damasat
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used		d Percent itives
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used		Type and F	ercent Additives		
Perforate Protect Casing										
Plug Back TD Plug Off Zone										
Did you perform a hydrau	•					Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to							= :	p question 3)	of the ACO	()
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemicai d	isciosure re	gistry?	Yes	No (If No, fill	out Page Three	or the ACO-1	<i>)</i>
Shots Per Foot		ION RECORD - I Footage of Each I					cture, Shot, Cement mount and Kind of Ma		d	Depth
TUBING RECORD:	Size:	Set At:		Packer A	i:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or Ef	NHR. Prod	ducing Meth	ıod:		1				
			Flowing	Pumpin	g	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:		M	METHOD OF	COMPLE	ETION:		PRODUCTIO	ON INTERVA	
Vented Sold		Open		Perf.	Dually	Comp. Cor	mmingled			
	bmit ACO-18.)		(Specify)		(Submit)	ACO-5) (Sub	mit ACO-4)			

Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

July 08, 2013

Amy McFadden Enerjex Kansas, Inc. 2038 S. PRINCETON ST., STE B OTTAWA, KS 66067

Re: ACO1 API 15-059-26364-00-00 THOELE SOUTH BSP-TS31 NW/4 Sec.29-18S-21E Franklin County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully, Amy McFadden

DRILL LOG

Operator License# 33741

API# 15-059-26364-00-00

Operator Enerjex Kansas

Lease Name Thoele South

Address 2038 S. Princeton St., Ste. 8, Ottawa, KS

Well # BSP TS 31

IVEIUS ETT EEST

Phone 785-241-2228

Spud Date 5/7/13 Cement 5/14/13

Contractor License # 32834

Contractor JTC Oil, Inc.

T.D 820 TD of Pipe 797

3 sacks cement

Surf. Pipe Size_7" Depth__22'

County Franklin

Thickness	Strata	From	То	Thickness	Strata	From	To
2	soil	0	2	7	lime	212	219
2	lime	2	4	4	shale	219	223
4	clay	4	8	5	red bed	223	228
21	lime	8	29	34	shale	228	262
4	shale	29	33	15	lime	262_	277
5	red bed	33	38	9	shale	277	286
26	shale	38	64	30	lime	286	316
34	Jime	64	98	9	black shale	316	32 <u>5</u>
72	shale	98	170	24	lime	325	349
20	lime	170	190	4	coal	349	35 <u>3</u>
22	shale	190	212	12	lime	353	365
				149	shale	365	514

	2	lime	514	516
	4	red bed	516	520
	13	shale	520	533
	19	lime	533	<u>552</u>
	6	shale	552	558
	3	sand	558	561
Little oil	2	sand	561	564
	3	sand	564	<u> 567</u>
	23	shale	567	590
	4	coal	590	594
	2	shale	594	596
	12	lime	596	608
	8	shale	608	616
	3	lime	616	619
	20	black shale	619	639
	12	lime	639	<u>651</u>
	12	shale	<u>6</u> 51	663
	2	coal	663	665
	6	lime	665	67 <u>1</u>
	2	lime oil	671	673 ok
	2	lime oil		75 good
	3	lime oil		78 good
		· · · · · · · · · · · · · · · · · · ·		

	2	lime oil	678-680broken
A A A C ADDRESS CONTRACTOR CONTRA	5	coal	680-685
	21	sand	685-706
	42	shale	706-748
	11	oil sand	748-749 ok
	2	oil sand	749-751 good
	2	oil sand	751-753 good
	2	oil sand	753-755 good
	2	oil sand	755-757broken
	7	sand	757-764
		Shale	764



258815

LOCATION Fred Mader
FOREMAN O Hawa KS

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

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WEI	L NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5/14/13 CUSTOMER	2579	78 So	That BSPTS.31	NW 19	18	21	FR
CUSTOMER	Pasa	aurene l	-LC	TRUCK#	DRIVER	TRUCK #	DRIVER
Ene. MAILING ADDRE	SS SS	301.642	ggamensonos de la Maria de construir de principa de promonomo de la construir	712	Fre Mad	11,000	DIMATIA
1097	5 Grand	Wind 1	or I	495	Har Bec	NB	
CITY	5 Grand	STATE	ZIP CODE	675	Kei Det	K.D	
Overla	nd Park	KS	66210	548	mik Hea	mt	
JOB TYPE Lo		HOLE SIZE	HOLE DEPTH	820	CASING SIZE & W		EUF
CASING DEPTH_	797 5	DRILL PIPE_	TUBING			OTHER	
SLURRY WEIGH	* * * * * * * * * * * * * * * * * * * *	SLURRY VOL	WATER gal/sk		CEMENT LEFT in	CASING 고 ^{노 시}	Phe
DISPLACEMENT	4.63	DISPLACEME	NT PSI MIX PSI		RATE 58PW		
REMARKS: 1	oldorew	med by	. Establish pu	my rate	· MY LP	Ump 100#	Cul
flush.	Misex	Pump	1055KS 70/30 F	or mire	Coment :	2% aul 5%	5 Sult
V2 # 4	hans Se	al /5/4	Cement to	surface.	Flush	Oumpr 1,	hes
olea	u. Drs/	Vace à	2/2" Rubber plug	1 to cal	IN TO	Pressura	40
8000	# PS1.	Rilease	prossure for se	* float	valve. S	huxin	
cas	Mg.					The Profit of the State of the	
	U	······································					THE PROPERTY OF THE PROPERTY O
		n kan menanan pagaman an Amel Maria Malaysian kan kan pagaman an Amel			-10	and the second	
JI	c Drills	4			Ten	Made	
		<u>v</u>					
ACCOUNT CODE	QUANITY	or UNITS	DESCRIPTION of	SERVICES or PR	ODUCT	UNIT PRICE	TOTAL
5401		1	PUMP CHARGE		495	M10109-M10034-1	1085
5486			MILEAGE				N/c
5402		797	Cashy foote	3^			NIC
5407	1/2 Missi	mon	Ton Miles		548		18400
5502C		12hr	80 BBL Vac	Truck	675		13500
·				TO COLUMN STATE OF THE STATE OF			
1127		1055KS	70/30 Por Mi	x Comes	J		140175
1118B		2854	Premium Ge			4.	62 70
1/11620		213#	Granulated				83 93
1107A		53*	PhonoSeal				7/55
4402		1	2/2" Rubber P	luc		\$ 100 A	2950
		1		0			
						1837 - 1880 - 1880	
					E A		
						Minhiora	
							principal management of the second
		7			47.5%	SALES TAX	12859
Ravin 3737	0- 0	7 11	- The second of			ESTIMATED TOTAL	3181
AUTHORIZTION	Dall D	M1 -	TITLE			DATE	_ ~ · U '

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.