

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1154275

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:			West
Address 2:		Feet from Dorth / South Line of Se	ection
City: State:	Zip:+	Feet from Cast / West Line of Se	ection
Contact Person:		Footages Calculated from Nearest Outside Section Corner:	
Phone: ()			
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 SW Gas D&A EN OG GS CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.)	VD SIOW HR SIGW SW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: If Alternate II completion, cement circulated from: feet depth to: w/s	_ Feet
If Workover/Re-entry: Old Well Info as follow			
Operator: Well Name: Original Comp. Date: Orig		Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume:	bbla
	onv. to ENHR Conv. to SWD	Dewatering method used:	
Plug Back:	Plug Back Total Depth	Location of fluid disposal if hauled offsite:	
Commingled Permit #	#:	Operator Name:	
	#:	Lease Name: License #:	
	#:	Quarter Sec TwpS. R East	West
	#:	County: Permit #:	
Spud Date or Date Reached TD Recompletion Date	Completion Date or 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	1154275			
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)	☐ Log Name	Formatior	n (Top), Depth an		Sample Datum	
Samples Sent to Geolog	gical Survey	Yes No)	Name			Тор	Datum	
Cores Taken Electric Log Run Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>		Yes No Yes No Yes No	>						
List All E. Logs Run:									
		CAS	ING RECORD	New	Used				
		Report all strings	set-conductor, surfa	ace, interm	nediate, productio	on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / F		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						ement Squeeze Record I of Material Used)	Depth		
TUBING RECORD:	Size: Set At: F			Packer	At:	Liner R	un:	No		
Date of First, Resumed Production, SWD or ENHR.			۲.	Producing N	_	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
									Ι	
DISPOSITION OF GAS:				METHOD	OF COMPLE	TION:		PRODUCTION INTE	RVAL:	
Vented Sold Used on Lease			Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)			
(If vented, Submit ACO-18.)			Other (Specify)							

Geologist's Report WellSight Systems Scale 1:240 (5''=100') Imperial Measured Depth Log								
Location:	V 1							
Bottom Hole Coordinates: Ground Elevation (ft): Logged Interval (ft): Formation: Type of Drilling Fluid:	1392 K.B. Elevation (ft): 1400 2700 To: 2838 Total Depth (ft): 2838 MISSISSIPPI							
	Geologist							
Name:	Tom Blair							

Drilling Information

Operator

Company: AAPG Certified Petroleum Geologist #5892

620-394-2324 tomkat@sktc.net

Address: 22150 SE Cole Creek Rd. Atlanta, KS 67008

Company: W.D. SHORT OIL CO., LLC

OXFORD, KS 67119

Address: 102 S. RIVER RD.

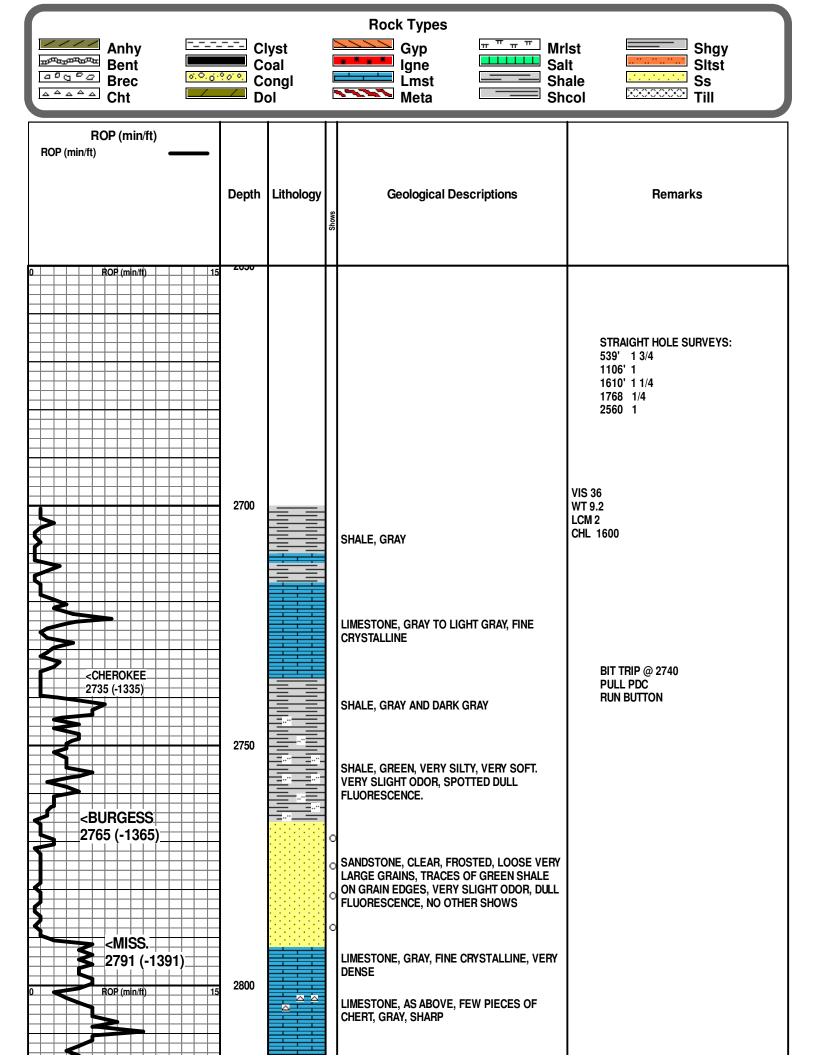
CONTRACTOR: GULICK DRILLING CO. INC. SURFACE PIPE: 202 FT. OF 8 5/8 IN. HOLE SIZE: 7 7/8 IN.

CHEROKEE BURGESS	2735 2765	(-1335) (-1365)
MISSISSIPPI	2791	(-1391)
RTD	2838	(-1438)

Formation Tops

Remarks

The Burgess sand appeared identical to the twin well 100 ft. to the West. 5 1/2 inch casing was set in order to further test the Burgess Formation.



<pre><rtd (-1438)<="" 2838="" pre=""></rtd></pre>		LIMESTONE, GRAY TO WHITE, WITH CHERT, WHITE	
	2850		
	2900		
	2050		

CONSOLIDATED Oil Well Services, LLC	REMIT Consolidated Oil We Dept. 9 P.O. Box Houston, TX 7	ell Services, LLC 970 4346	MAIN OFFICE P.O. Box 884 Chanute, KS 66720 620/431-9210 • 1-800/467-8676 Fax 620/431-0012		
INVOICE			Invoice #	257786	
Invoice Date: 03/31/2013	Terms:		Pa	ge 1	
W.D. SHORT OIL CO LLC P.O. BOX 729 OXFORD KS 67115 (620)455-3576		BALZER C 1A 41360 35-235-2E 03-29-13 KS			
1110A KOL SEA 1107A PHENOSI 4159 FLOAT S 4130 CENTRAI	otion SET CEMENT AL (50# BAG) SAL (M) 40# BAG) SHOE AFU 5 1/2" LIZER 5 1/2" LATCH DOWN PLUG	125.00 625.00 125.00 1.00		Total 2400.00 287.50 161.25 344.00 144.00 254.00	
Description 515 TON MILEAGE DELIVERY 520 CEMENT PUMP 520 EQUIPMENT MILEAGE (ON)	E WAY)	Hours 344.00 1.00 50.00	1030.00	Total 460.96 1030.00 200.00	

						=======	
=========		Tool abt.	0.0	Tax:	298.02	AR	5579.73
Parts:	3590.75	Freight:				1111	
Labor:	.00	Misc:	.00	Total:	5579.73		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed						_ Date_		
BARTLESVILLE, OK 918/338-0808	EL DORADO, KS 316/322-7022	EUREKA, KS 620/583-7664	PONCA CITY, OK 580/762-2303	OAKLEY, KS 785/672-8822	OTTAWA, KS 785/242-4044	THAYER, KS 620/839-5269	GILLETTE, WY 307/686-4914	CUSHING, C 918/225-265

G	ONSOLIDA Dil Well Service	IR, LLC		TERE	U	LOCATION C	UREKA	
	hanute, KS 667 or 800-467-8676				TMENT REP T	ORT		Ks
DATE	CUSTOMER #	WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY
3-29-13	7876	BALZER C # I A		A	35	235	25	HARVEY
CUSTOMER	D. Short C	DIL Co., INC		Gulick DR19.	TRUCK #	DRIVER	TRUCK #	DRIVER
	MAILING ADDRESS			Unit.	520	John S.		
CITY STATE ZIP CODE			- ·	515	Merle R.			
OXF0		Ks	67119					
			1/8	HOLE DEPTH	2838 KB	CASING SIZE & W	EIGHT 5 1/2	
CASING DEPTH 28.27 G.L. DRILL PIPETUBING_			TUBING					
SLURRY WEIGHT 13.6 * SLURRY VOL 41 B6C WATER g				WATER gal/s	k 9.0 CEMENT LEFT in CASING 0'			
DISPLACEMENT 68.5 BL DISPLACEMENT PSI 700 MER PSI 1100 Bump Plug RATE 5 BPM								
REMARKS: SAFEty Meeting: Big up to 51/2 CASING. BREAK CIRCULAtion w/ 15 BOL FRESH WAter.								
Mixed 125 SKS THICK Set Coment w/ 5 * Kol-Seal /SK 1* PhenoSeal /SK @ 13.6 * / gal yreid 1.85								
= 41 Bbl Sluppy. Shut down. WASH out Pomp & Lines. Release LATCH down Plug. Displace Plug								
to SEAT w/ 68.5 Bbl FRESH WAter. FINAL PUMPING PRESSURE 700 PSI. Bump Plug to 1100 PSI. WAIT 2								
MINS. Release PRESSURE. FIORT & Plug Held. Good CIRCULATION AT ALL TIMES while CEMENTING.								
Job Comp	lete, Rig do	an.						

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	50	MILEAGE	4.00	200.00
1126 A	125 SKS	THICK Set Cement	19.20	2400.00
1110 A	625 *	KOL-SEAL 5 */SK	. 46	287.50
1107 A	125 #	Phenoseal 1* /sk	1.29	161.25
5407A	6.88 Tons	50 Miles Buck Delv.	1.34	460.96
4159	/	51/2 AFU FLOAT Shoe	344.00	344.00
4130	3	51/2 × 77/8 Centralizers	48.00	144.00
4454	1	51/2 LATCH down Plug	254.00	254.00
			Sub Total	5281.71
avin 3737		THANK YOU 8.3%	SALES TAX	298.0Q
			ESTIMATED TOTAL	5579.73
	mi Jam	TITLE	DATE	

AUTHORIZTION _____ DATE_____ 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

CONSOLIDATED Oil Well Services, LLC	REMIT TO Consolidated Oil Well Service Dept. 970 P.O. Box 4346 Houston, TX 77210-4346	620/431-9210 • 1-800/467-8676 Fax 620/431-0012
INVOICE		Invoice # 257704
Invoice Date: 03/31/2013	======================================	Page 1
W.D. SHORT OIL CO LLC P.O. BOX 729 OXFORD KS 67115 (620)455-3576	BALZER 41436 35-238- 03-26-1 KS	2E
1102 CALCIUM	A" CEMENT (SALE) CHLORIDE (50#) GEL / BENTONITE	Qty Unit PriceTotal125.0014.95001868.75355.00.7400262.70240.00.210050.4032.002.350075.20
Description 445 CEMENT PUMP (SURFACE) 445 EQUIPMENT MILEAGE (ONE 611 TON MILEAGE DELIVERY	WAY)	Hours Unit PriceTotal1.00825.00825.0060.004.00240.00352.191.34471.93
Parts: 2257.05 Freight: Labor: .00 Misc:	.00 Tax: .00 Total:	187.33 AR 3981.3 3981.31
Sublt: .00 Supplies	.00 Change:	.00
		Date
Signed		WA, KS THAYER, KS GILLETTE, WY CUSHING,

BARTLESVILLE, OK EL DORADO, KS EUREKA, KS PONCA CITY, OK OAKLEY, KS OTTAWA, KS 918/338-0808 316/322-7022 620/583-7664 580/762-2303 785/672-8822 785/242-4044

THAYER, KS 620/839-5269

GILLETTE, WY 307/686-4914

WY CUSHING, 914 918/225-2£

		RRED		TICKET NUMB	vreka K	
PO Box 884, Chanute, KS 66720	FIELD TICKET			•	Ta Dela	K
620-431-9210 or 800-467-8676 DATE CUSTOMER #	WELL NAME & NUM	BER	SECTION	5-079-2070 TOWNSHIP	RANGE	COUNT
3-26-13 1816	Balzer C#	EIA	35	235	ZE	Harvey
W. D. Short	oil Co Inc.	Gulick Drlg	TRUCK #	DRIVER Dave 6	TRUCK #	DRIVER
CITY OXFord ST	KS 67119		611	Joeyk		
	DLE SIZE 12'14"	HOLE DEPTH	-	CASING SIZE & W		-
SLURRY WEIGHT 14.5-15# SL	URRY VOL 32 86/	WATER gal/sl	K 6.40	CEMENT LEFT in	CASING 15-2	20'
REMARKS: Safety Meetin Blol HZO, mixed + 1/4 # Flocele/Sh	11 1 10 10		casing , i cernent	. / -	ulation % calci bl Hzo to pit	

1hanks Shannon & Crew"

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	60	MILEAGE	4.00	240.00
			1.1.00	1010 75
11045	125 SKS	Class A Cement	14,95	1868,75
1102	355#	Calcium @ 3%	. 74	2.62, 70
1118 B	240#	6el @ 2%	. 21	50,40
1107	32 #	Florele@ 114 #/SK	2,35	75,20
5407A	5.87 Tons	Ton mileage bulk Truck	1.34	471,93
			506 Total	3793, 98 187, 31
		06110K1 8,3%		187, 32
Ravin 3737		001101	ESTIMATED	3981. 31
AUTHORIZTION	mant	TITLE Too Pusher		26-13

AUTHORIZTION /// AM 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

a day a second

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