

### Kansas Corporation Commission Oil & Gas Conservation Division

1155753

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 🗌 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 ☐ SWD ☐ SIOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW	Amount of Surface Pipe Set and Cemented at: Feet  Multiple Stage Cementing Collar Used?  Yes No
Gas Box Sigw Sigw Temp. Abd.  CM (Coal Bed Methane)	If yes, show depth set: Feet
Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to: w/ 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 #:	QuarterSecTwpS. R East West
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.

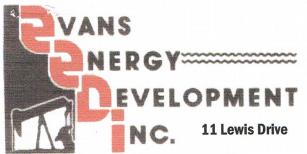
**Submitted Electronically** 

KCC Office Use ONLY
Letter of Confidentiality Received
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I I II Approved by: Date:

Side Two

1155753

Operator Name:				Lease N	lame:			Well #:		
Sec Twp	S. R	East	] West	County:						
INSTRUCTIONS: Sh time tool open and clo recovery, and flow rat line Logs surveyed. A	osed, flowing and shu es if gas to surface te	t-in pressures st, along with	s, whether s final chart(s	hut-in press	ure reach	ed static level,	hydrostatic pres	ssures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taker (Attach Additional		Yes	No		Log	g Formation	n (Top), Depth a	nd Datum		Sample
Samples Sent to Geo	logical Survey	Yes	No		Name			Тор		Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Cop)	d Electronically	☐ Yes ☐ Yes ☐ Yes	No No No							
List All E. Logs Run:										
		Report a		RECORD	New	Used	on, etc.			
Purpose of String	Size Hole Drilled	Size C Set (In	asing	Weig Lbs. /	ht	Setting Depth	Type of Cement	# Sacks Used	, ,,	and Percent additives
		<u> </u> 	DDITIONAL	CEMENTIN	IG / SQUE	EZE RECORD				
Purpose:  Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of 0	Cement	# Sacks	Used		Type and	Percent Additives		
Shots Per Foot	PERFORATI Specify	ON RECORD - Footage of Each	Bridge Plug n Interval Peri	s Set/Type forated			cture, Shot, Ceme mount and Kind of N	nt Squeeze Record Material Used)	d 	Depth
TUBING RECORD:	Size:	Set At:		Packer At:		Liner Run:				
							Yes N	0		
Date of First, Resumed	Production, SWD or EN	IHR. Pr	oducing Meth	nod:	g 🗌 G	as Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	BI	ols.	Gas-Oil Ratio		Gravity
DISPOSITI	ON OF GAS:		N	METHOD OF	COMPLET	TION:		PRODUCTIO	ON INTER	VAL:
Vented Solo	Used on Lease		n Hole	Perf.	Dually (		nmingled mit ACO-4)			
(11 verneu, 3u	10./	Othe	r (Specify)				I —			



# Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

#### **WELL LOG**

Paola, KS 66071

Heavy Oil Treatment Solutions, LLC Mini-Farms #2 API # 15-103-21,375 July 30 - August 2, 2013

Thickness of Strata	<b>Formation</b>	<u>Total</u>
15	soil & clay	15
17	broken lime, boulders	32
39	sand & gravel, boulde	71
3	gravel, boulders	74
2	silty shale	76
17	shale	93
10	silty, sandy shale	103
4	limey sand	107
36	sandstone	143 white, making water
6	shale	149
11	lime	160
6	shale	166
6	lime	172
8	shale	180
4	sandstone	184
5	shale	189
16	lime	205
29	shale	234
27	lime	261
1	shale	262
32	lime	294 oil show, white lime
29	shale	323
4	lime	327
4	shale	331
3	lime	334
7	shale	341
14	lime	355
18	shale	373
16	lime	389
2	shale	391
15	lime	406
3	shale	409
16	lime	425
9	shale	434
22	lime	456 white
4	shale	460 black
3	lime	463 white
3	shale	466 grey
10	lime	476 off white, base of the Kansas City

## Page 2

4	shale	480 grey
6	silty shale	486 green
4	sand	490 hard, green sand
114	shale	604 grey
6	shale	610 red, caving off bad
23	shale	633 green
8	lime	641 tan
5	shale	646 grey
1	coal	647 black
6	shale	653 green
7	lime	660 tan
18	shale	678 grey & green
4	lime	682 tan
1	shale	683 black
	coal	684 black
5	shale	689 black
6	lime	695 tan
39	shale	734 grey & green
5	broken sand	734 grey & green 739 light brown sand & green shale, light odor
		and bleeding, gassy
4	limey sand	743 green
10	broken sand	753 light brown & green, gassy, light oil show
3	oil sand	756 light brown, minimal odor, no bleeding
2	shale	758
5	oil sand	763 light brown, light odor
1	silty shale	764 grey
3	oil sand	767 grey sand, good bleeding
0.5	shale 7	767.5 grey
2.5	oil sand	770 grey, oil sand, good bleeding
0.5	shale	770.5 grey
2.5	oil sand	773 grey, oil sand, ok bleeding
1.5	•	774.5 grey
1		775.5 grey oil sand & grey shale, light bleeding
1		776.5 grey
1.5	broken sand	778 grey oil sand & grey shale, light bleeding
3	silty shale	781 grey
2	oil sand	783 grey sand, light bleeding
8	shale	791 grey
4	grey sand	795 grey sand, no oil
11	oil sand	806 grey sand, ok bleeding
2	silty shale	808 grey
3	grey sand	811 no oil
3	silty shale	814 grey
3	grey sand	817 no oil
21	silty shale	838 grey
1	coal	839 black
4	shale	843 grey
5	sand	848 grey, no show
1	silty shale	849 grey & green

## Page 3

71	shale	920 grey & black
1	coal	921 black
25	shale	946
1	lime	947
8	silty shale	955 green
13	black shale	968
5	silty shale	973 white & black
7	sand	980 white & green
35	shale	1015 grey
2	sand	1017 grey
9	shale	1026 grey
11	sand	1037 grey & white, hard
4	silty shale	1041 grey
22	shale	1063 grey
1	coal	1064
4	shale	1068 black & grey
2	sand	1070 white
1	shale	1071 black
5	sand	1076 white
12	shale	1088 grey
23	silty shale	1111 grey & white
1	coal	1112 black
15	silty shale	1127 grey & white
13	shale	1140 black
		1140 TD

Drilled a 12 1/4" hole to 83.7' Drilled a 5 5/8" hole to 1,140'

Set 83.7' of 7" surface casing cemented by Consolidated Oil Well Services.

Set 1,109' of 2 7/8" 8 round upset tubing including 5 centralizers, 1 float shoe, 1 clamp.

	Core Times	6			
	<b>Minutes</b>	Seconds		<b>Minutes</b>	Seconds
765		35	803	1	4
766		54	804		56
767		53	805		48
768		36	806		41
769		32	807		43
770		33	808		37
771		36	809		38
772		47	810		40
773	1	0	811		46
774		49	812		52
775		43	813		44
776		49	814		40
777		50	815		42
778		49	816		45
779		38	817		43
780		35	818	1	0
781		36	819		48
782		40	820		49
783		45	821		54
784		30	822		52



TICKET NUM	BER_ 42268	
LOCATION_	OHaira, KS	
FOREMAN	Case Nouned 11	

# FIELD TICKET & TREATMENT REPORT

	or 800-467-8676			CEMEN	T			
DATE	CUSTOMER#	WEL	L NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
8/6/13		Minit	Farm #		NW 23	12	20	LU
CUSTOMER								
Mini	torus Lead	se Fund			TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDR	ESS				481	Casken	1 Safety	Meeting
1513	Mustana	Dr			Ida	Keicar	/ /	
CITY	7	STATE	ZIP CODE		558	JDAR HOS	1	
Baldwi	in City	KS	66000		34715	Disperializant	~	
JOB TYPE		HOLE SIZE	97/8"	_ _HOLE DEPTH	A .	CASING SIZE & \	VEIGHT 7"	
CASING DEPTH	1_30'_	DRILL PIPE		TUBING			OTHER	
SLURRY WEIGH	HT	SLURRY VOL_		WATER gal/s	k	CEMENT LEFT in	CASING 10	<i>i</i>
DISPLACEMEN	T 3.3 6615	DISPLACEMEN	NT PSI	MIX PSI	7,01000	RATE 4.56	Du .	
REMARKS:	Co sofety	modice	establish	hed circu	station is	rixed + pu	agoed 70	sles Class
"A" couse	. 1	01	art at			our sk		Sucface
displaced.	rement u	3/331	ble forch	Α		Jasino.		. ,
							to volet the State	
							1//	•
		•						7
			100				77/	
INCOME.	<u>,                                     </u>						La maria tiana	
	-2-		A TELEVISION		za in kala in ka	atti ji bibayd		
ACCOUNT CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES or PR	RODUCT	UNIT PRICE	TOTAL
P-11-15			DUMP CHAPC	· -				07.00

ACCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
51015		PUMP CHARGE		870.00
5400	45 Mi	MILEAGE		189.00
5402	90'	caring Instage		Married State Confederation of State Confeder
5407	Minimoun	You milegge		368.09
SSOOC	3 hrs	En Vac		270.00
11040	70 drs	Clase "A" consent	arel the frequency	1099.0
/118B	332 4	Premium Gel	**.	73.0
1100	130 井	Calciona Chloride		102.90
		Paid check # 1015		\(\sigma_{\sigma}\)
		0 (2		
		Coff /		
in 3737		1.15%	SALES TAX	91.160
	Va. 11/14/1-		ESTIMATED	3063.10

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