

Kansas Corporation Commission Oil & Gas Conservation Division

1156048

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 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 Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #: SWD Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name: License #: Quarter Sec Twp S. R East West
ENHR Permit #:	County: Permit #:
Spud Date or Recompletion Date 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 Nam	ne:			Well #:		
Sec Twp	S. R	East West	County:						
time tool open and clos	sed, flowing and shut- s if gas to surface tes	base of formations per in pressures, whether s t, along with final chart well site report.	shut-in pressure	reached s	tatic level,	hydrostatic pres	ssures, bottom h	ole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional S	theets)	Yes No	[Log	Formation	n (Top), Depth a	nd Datum		Sample
Samples Sent to Geole	•	Yes No	1	Name			Тор	I	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	l Electronically	Yes No Yes No Yes No							
List All E. Logs Run:									
		CASING Report all strings set-	RECORD		Used	on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	, ,,	and Percent dditives
	263	331 (3.3.)	2001711		<u> </u>	Comon	0000		
		ADDITIONA	L OFMENTING /	00115575	DECORD				
Purpose:	Depth		L CEMENTING /		RECORD	Time and	Darsont Additives		
Perforate Top Bottom		Type of Cement	# Sacks Used Typ			Type and	Percent Additives		
Protect Casing Plug Back TD									
Plug Off Zone									
	PERFORATIO	N RECORD - Bridge Plu	as Set/Tyne		Acid Frag	ture Shot Ceme	nt Squeeze Record	Н	
Shots Per Foot	Specify Fo	rforated	rated (Amount and Kind			d of Material Used) Depth			
TUBING RECORD:	Size:	Set At:	Packer At:	Line	r Run:	Yes N	0		
Date of First, Resumed I	Production, SWD or ENH	R. Producing Me	thod:	Gas Li	ft C	ther (Explain)			
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf	Water	Bl	ols.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		METHOD OF COI	MPLETION:			PRODUCTIO	ON INTER	VAL:
Vented Sold	Used on Lease	Open Hole	Perf.	Dually Comp		nmingled			
(If vented, Sub	mit ACO-18.)	Other (Specify)	(Su	ıbmit ACO-5)	(Subi	nit ACO-4) —			

DRILL LOG

Operator License # 32834				API# 15-121-2951/-00-00					
OperatorJTC Oil, Inc.				Lease Name Wilson A					
Address	P. O. Box	24386		Well #	P-1		- Proposition and -		
	Stanley, K	S 662	83						
Contrac	tor JTC Oil, I	nc.		Spud	Date 6/7/13	_Cem	ent <u>6/14/13</u>		
Contrac	tor License	32834		Location of					
T.D6	<u>60'</u> T.D. o	f Pipe_	622'	Teaching and Association (Control of the Control of	feet	from			
Surf. Pip	oe Size <u>7"</u>	Depth	20′	-	feet	from			
Kind of V	Well <u>Produ</u>	ıction		County	Miami				
Thickness	Strata	From	То	Thickness	Strata	From	То		
2	Soil	0	2	15	Lime	295	310		
8	Clay	2	10	40	Shale	310	350		
20	Shale	10	30	3	Coal	350	353		
14	Lime	30	44	7	Shale	353	360		
11	Shale	44	55	7	Lime	360	367		
29	Lime	55	84	10	Shale	367	377		
4	Black Shale	84	88	3	Lime	377	380		
22	Lime	88	110	19	Black Shale	380	399		
4	Coal	110	114	12	Lime	399	411		
14	Lime	114	128	15	Shale	411	426		
167	Shale	128	295	5	lime	426			

4 Coal	431	435
	435	443
	443	450
2 Shale	450	452
12 Sand	452	464
18 Shale	464	482
3 Lime	482	485
25 Black Sh	ale 485	510
2 Oil Sand	510	512 Little
1 Oil Sand	512	513 Little
28 Shale	513	541
	541	543
4 Coal	543	547
3 Shale	547	550
2 Oil Sand	550	552 Broken
2 Oil Sand		554 Broken
2 Oil Sand	554	556 OK
8 Oil Sand		564 Very Good
2 Oil Sand		566 Broken
3 Coal	566	569
	569	648
	ale 648	660



259693

LOCATION O Hawa KS
FOREMAN Fred Mader

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	4015	Wilson # AP-1			NE Y	18	22	mı
CUSTOMER		ر .				其"想"文艺的理事		And the second
MAILING ADDRE	10:1	Ive			TRUCK #	DRIVER	TRUCK #	DRIVER
		0 1	31		7/2	FreMad		
CITY	88 Plun	n Creek	K9		495	Har Bechlle		
090	_		l s		369	Der Mas		
Osama		KS.	66064		503	Ki Car		
JOB TYPE LO	ngstring	HOLE SIZE	<i>6</i> 3/4_н	IOLE DEPTH	660	CASING SIZE & W	VEIGHT 27/6	FUE
CASING DEPTH	622	DRILL PIPE	т	UBING			OTHER	
SLURRY WEIGH	T	SLURRY VOL_	W	VATER gal/sk		CEMENT LEFT in	CASING 23	"Plus
DISPLACEMENT	3.61_	DISPLACEMEN	T PSI M	IIX PSI	-	RATE SDP		2
REMARKS: /	old cres	teen w	me Circu	late i	well from	mpit. m:	x+ Puns	250#
Gel	Flush,	Mixx Pu	m 134	SKS C	owc ce	ment. Ce	ment to	
	face F	luch own.	oxlines o	lean	Displace	2%" Rubbar	alue to	
Cas	ing To.	Pressu	re to 80	10 # PSI	· Relea.	se pressur	e to soot	
	JU Value.	Shuti	~ Casiva			7		
			7					
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					•			
- U	TO Dill	M				9.0	VIII.	
	7 9110	-				fund	ynaxi	
ACCOUNT	QUANITY	or UNITS	DESC	CRIPTION of S	SERVICES or PR	ODUCT	UNIT PRICE	7074
CODE			PUMP CHARGE				UNIT PRICE	TOTAL
5401			MILEAGE			495		108500
5406		Romi				495		12600
5402		(22°	Casing	/				N/C
5407	Minin		Ton M			503		36 20
J502C		2 kvs	80 13 13	il Vac	lruck	369		180 29
3								
				-				
1126	/	134	owe e.	arount				264650
11188		2504	Premin					22 è
4402		1	25" Rub	ber Plus				2950
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						7/1		
					*	Monthson		
					1	A Din		
					i e	SALAR		
				•		7.55%	SALES TAX	70/19
Pavin 3737	1 . 11	1				7	ESTIMATED	206 19
	Bu Asida	//					TOTAL	4696 19
AUTHORIZTION_	ZIUN VINIMIN		TI	TLE			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 for