



KANSAS CORPORATION COMMISSION 1157227
OIL & GAS CONSERVATION DIVISION

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

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 #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

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: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. 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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	JAG Operations, Inc.
Well Name	Olson 2
Doc ID	1157227

All Electric Logs Run

Dual Induction Log
Dual Comensated Porosity Log
Computer Processed Interpretation
Microresistivity Log

Form	ACO1 - Well Completion
Operator	JAG Operations, Inc.
Well Name	Olson 2
Doc ID	1157227

Tops

Name	Top	Datum
ANHY	934	+945
TOPEKA	2762	-883
HEEBNER	2986	-1107
TORONTO	3007	-1128
LANSING	3035	-1156
BKC	3280	-1401
ARBUCKLE	3322	-1443
T.D.	3349	-1442

QUALITY WELL SERVICE, INC.

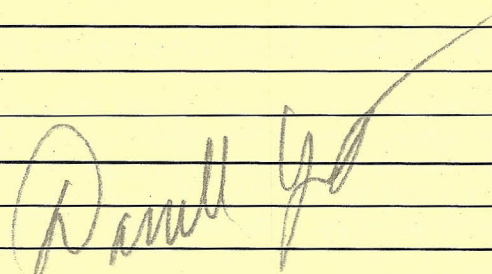
5993

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410
Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	8-13-13	Sec.	22	Twp.	13	Range	15	County	Russell	State	KS	On Location		Finish	12:30				
Lease	Olson		Well No.	2		Location Russell + Old 40' 6W to 179 th 1 North 3/4 West.													
Contractor	Southwind 8							Owner North into											
Type Job	Surface							To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.											
Hole Size	12 1/4		T.D.																
Csg.	8 5/8		Depth		227		Charge To									Jag Operations			
Tbg. Size			Depth		Street														
Tool			Depth		City													State	
Cement Left in Csg.			Shoe Joint		The above was done to satisfaction and supervision of owner agent or contractor.														
Meas Line			Displace		13.5 bbls		Cement Amount Ordered									150sk Common 2% Gel			
EQUIPMENT							3% CC												
Pumptrk	6	No.	Mud		Common									150					
Bulktrk	4	No.	Drill		Poz. Mix														
Bulktrk		No.			Gel.									3					
Pickup		No.			Calcium									5					
JOB SERVICES & REMARKS							Hulls												
Rat Hole					Salt														
Mouse Hole					Flowseal														
Centralizers					Kol-Seal														
Baskets					Mud CLR 48														
D/V or Port Collar					CFL-117 or CD110 CAF 38														
Ran 6jts 8 5/8 csg.							Sand												
Established circulation.							Handling									158			
Mix 150sk Common 2% Gel							Mileage									10			
3% CC Displaced with 13.5 bbls							FLOAT EQUIPMENT												
11% Shut in 300 psi.							Guide Shoe												
cement did circulate to surface.							Centralizer												
							Baskets												
							AFU Inserts												
							Float Shoe												
							Latch Down												
							Pumptrk Charge									Surface			
							Mileage									10			
																Tax			
X Signature																Discount			
																Total Charge			

QUALITY WELL SERVICE, INC.

5938

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

OFFICE
Heath's Cell 620-727-3410
Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	8-19-13	Sec.	22	Twp.	13	Range	15	County	Russell	State	Ks	On Location	11:15	Finish	3:00 AM
Lease	Olson	Well No.	# 2	Location Russell Ks 6 W to 179 th 1 N 3/4 W n. A.											
Contractor	Southwind # 9	Owner													
Type Job	PTA	To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.													
Hole Size	7 7/8	T.D.	3350	Charge To JAG OPERATIONS											
Csg.	4 1/2 D.P	Depth	3315	Street											
Tbg. Size		Depth		City State											
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.											
Cement Left in Csg.		Shoe Joint		Cement Amount Ordered 220 S. 60/40 4 1/2" CEL 1/4" CE											
Meas Line		Displace													

EQUIPMENT

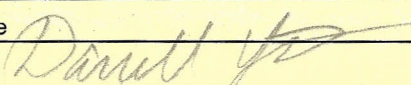
Pumptrk	No.	3	MIKE	Common	132
Bulktrk	No.	10	CHAD	Poz. Mix	88
Bulktrk	No.			Gel.	8
Pickup	No.		7000	Calcium	

JOB SERVICES & REMARKS

Rat Hole	30 SX	Hulls	
Mouse Hole	15 SX	Salt	
Centralizers		Flowseal	55"
Baskets		Kol-Seal	
D/V or Port Collar		Mud CLR 48	
1 st Plug	50 SX 3315'	CFL-117 or CD110 CAF 38	
Disp w/ mso		Sand	
		Handling	223
		Mileage	10

FLOAT EQUIPMENT

2 nd Plug	25 SX 775'	Guide Shoe	
Disp w/ H2O		Centralizer	
3 rd Plug	40 SX 450'	Baskets	
Disp w/ H2O		AFU Inserts	
		Float Shoe	
4 th Plug	40 SX 275'	Latch Down	
Disp w/ H2O		1 EA Dry hole Plug	
		LMU 10	
10 SX 40'		Pumptrk Charge	PTA
		Mileage	10

Thanks		Tax	
TODD MIKE & CHAD		Discount	
X Signature	PLEASE CALL AGAIN	Total Charge	
			



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Jag Operations Inc
 Po Box 628
 Russell KS, 67665
 ATTN: Mike Bair

22-13s-15w Russell KS
Olson #2
 Job Ticket: 53947 **DST#: 1**
 Test Start: 2013.08.17 @ 04:27:00

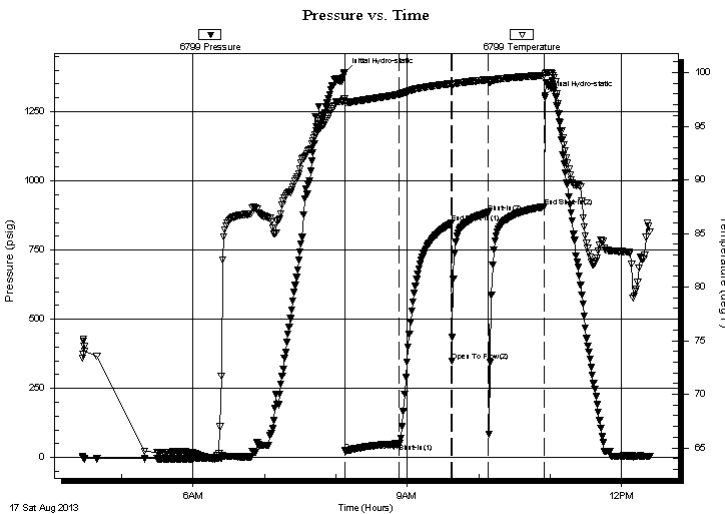
GENERAL INFORMATION:

Formation: **Topeka**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 08:07:30
 Time Test Ended: 12:24:30
 Interval: **2929.00 ft (KB) To 2975.00 ft (KB) (TVD)**
 Total Depth: 2975.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Cody Bloedorn
 Unit No: 53
 Reference Elevations: 1879.00 ft (KB)
 1871.00 ft (CF)
 KB to GR/CF: 8.00 ft

Serial #: 6799 Inside
 Press @ Run Depth: 885.78 psig @ 2967.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2013.08.17 End Date: 2013.08.17 Last Calib.: 2013.08.17
 Start Time: 04:27:05 End Time: 12:24:29 Time On Btm: 2013.08.17 @ 08:07:15
 Time Off Btm: 2013.08.17 @ 10:56:00

TEST COMMENT: 45 - IF- 1.5" blow
 45 - IS- No return
 30 - FF- No blow
 45 - FS- No return

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1391.64	97.60	Initial Hydro-static
1	24.40	97.25	Open To Flow (1)
46	50.01	97.98	Shut-In(1)
90	846.44	98.97	End Shut-In(1)
91	347.72	98.84	Open To Flow (2)
121	885.78	99.34	Shut-In(2)
168	906.48	99.75	End Shut-In(2)
169	1307.54	99.89	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
65.00	MW, w with show of oil, 90%M, 10%W	0.37

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jag Operations Inc
Po Box 628
Russell KS, 67665
ATTN: Mike Bair

22-13s-15w Russell KS
Olson #2
Job Ticket: 53947 **DST#: 1**
Test Start: 2013.08.17 @ 04:27:00

Mud and Cushion Information

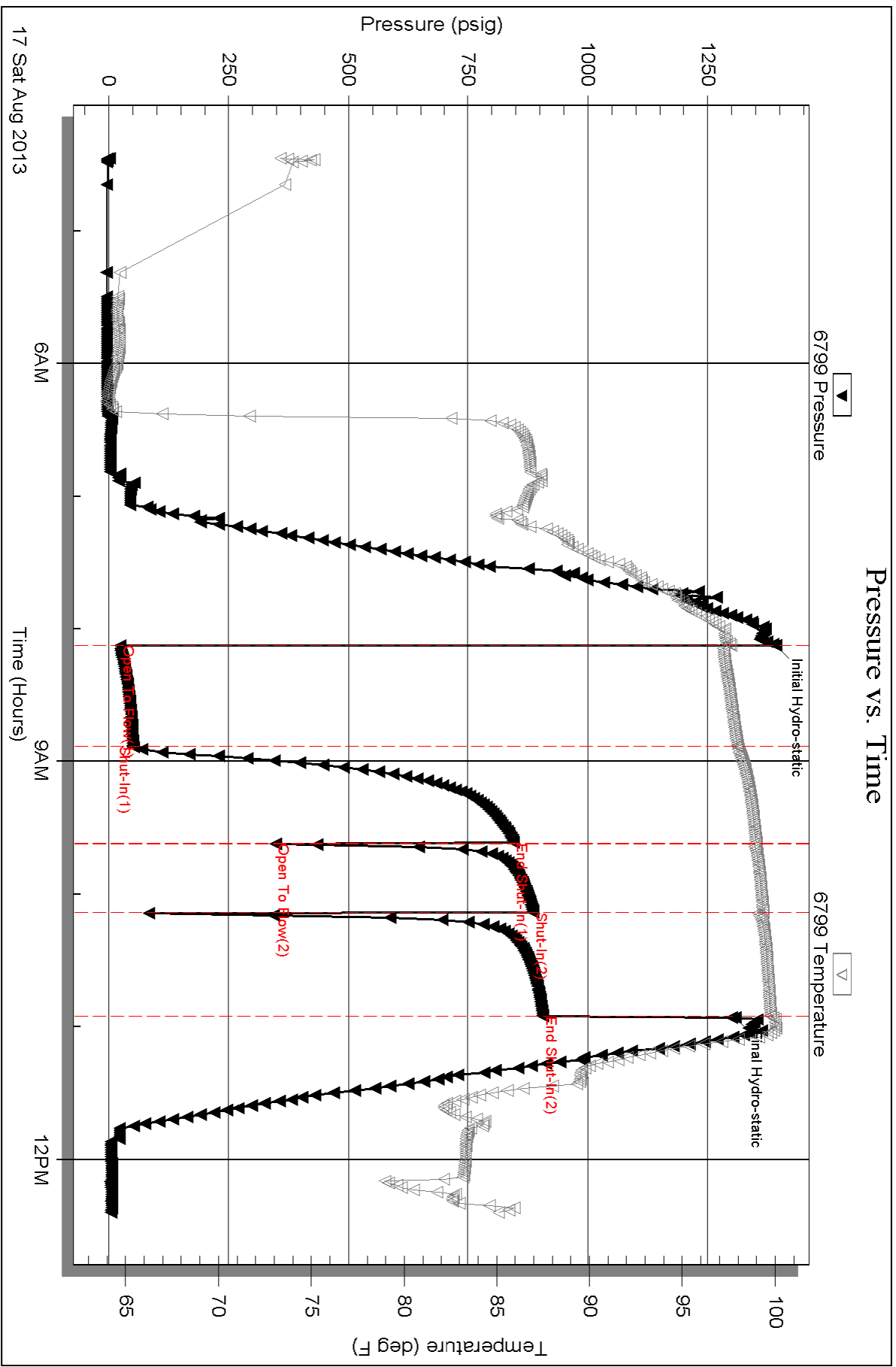
Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 60.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.99 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 2500.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
65.00	MW, with show of oil, 90%M, 10%W	0.365

Total Length: 65.00 ft Total Volume: 0.365 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Jag Operations Inc
Po Box 628
Russell KS, 67665
ATTN: Mike Bair

22-13s-15w Russell KS
Olson #2
Job Ticket: 53948 **DST#: 2**
Test Start: 2013.08.17 @ 22:41:00

GENERAL INFORMATION:

Formation: **LKC "A-C"**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 01:24:45
Time Test Ended: 05:40:45
Interval: **3014.00 ft (KB) To 3090.00 ft (KB) (TVD)**
Total Depth: 3090.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Fair
Reference Elevations: 1879.00 ft (KB)
1871.00 ft (CF)
KB to GR/CF: 8.00 ft

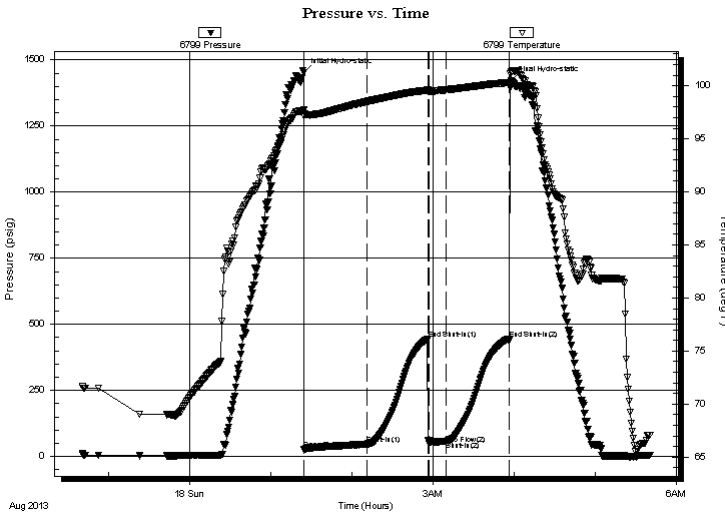
Serial #: 6799

Inside

Press @ Run Depth: 56.68 psig @ 3082.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2013.08.17 End Date: 2013.08.18 Last Calib.: 2013.08.18
Start Time: 22:41:05 End Time: 05:40:44 Time On Btm: 2013.08.18 @ 01:24:30
Time Off Btm: 2013.08.18 @ 03:57:45

TEST COMMENT: 45 - IF- B.O.B. in 8 minutes
45 - IS- No return
15 - FF- B.O.B. in 30 seconds
45 - FS- No return

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1451.86	97.71	Initial Hydro-static
1	27.85	97.20	Open To Flow (1)
47	45.83	98.51	Shut-In(1)
92	444.24	99.58	End Shut-In(1)
93	47.85	99.45	Open To Flow (2)
106	56.68	99.62	Shut-In(2)
152	445.95	100.29	End Shut-In(2)
154	1420.88	101.21	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
62.00	GOCM, 20%M, 20%O, 60%G	0.87
40.00	GSOCM, 10%G, 10%O, 80%M	0.56
0.00	682' of G.I.P.	0.00

* Recovery from multiple tests

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jag Operations Inc
Po Box 628
Russell KS, 67665
ATTN: Mike Bair

22-13s-15w Russell KS
Olson #2
Job Ticket: 53948 **DST#: 2**
Test Start: 2013.08.17 @ 22:41:00

Mud and Cushion Information

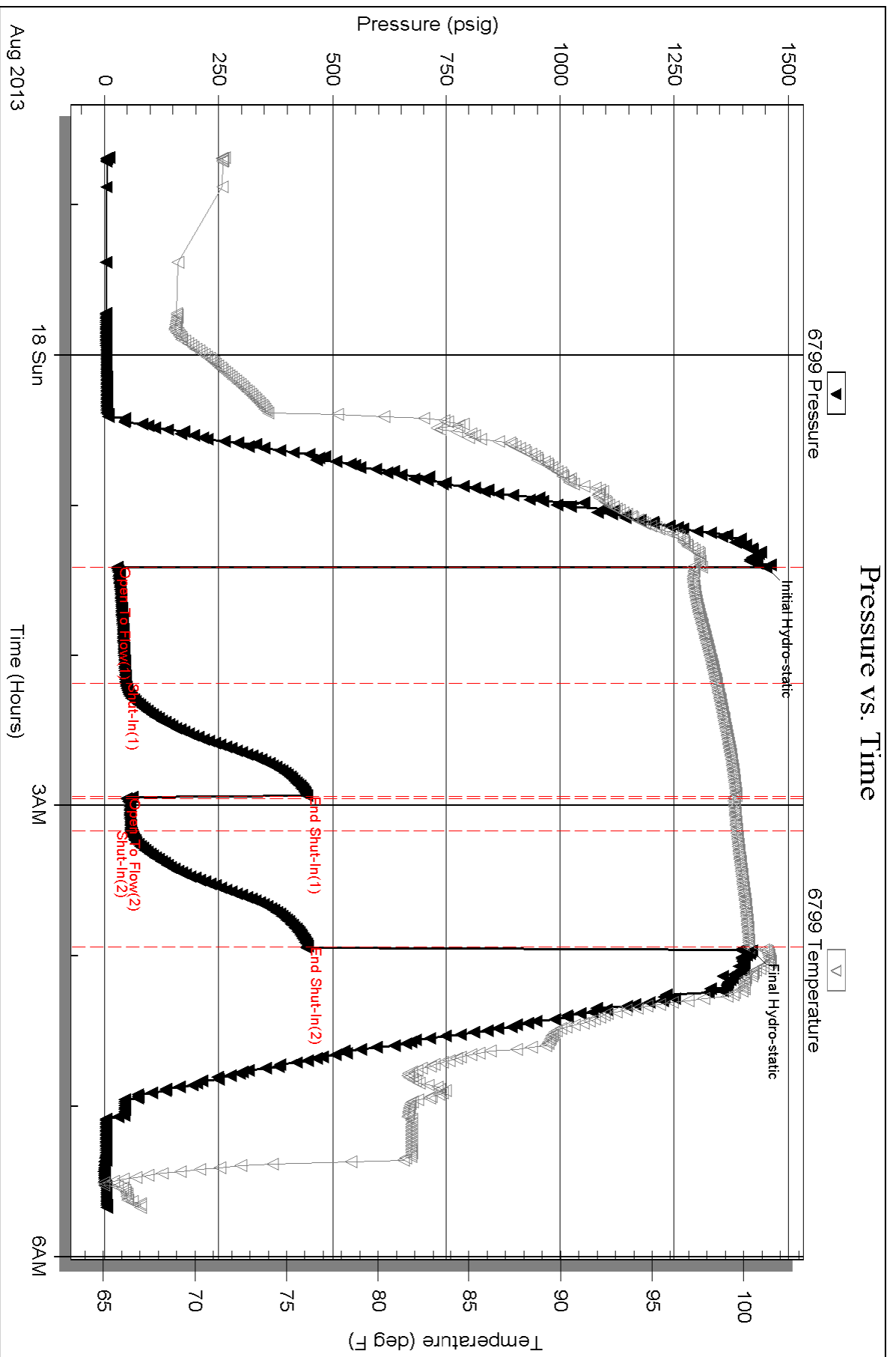
Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 60.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.98 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 2500.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
62.00	GOCM, 20%M, 20%O, 60%G	0.870
40.00	GSOCM, 10%G, 10%O, 80%M	0.561
0.00	682' of G.I.P.	0.000

Total Length: 102.00 ft Total Volume: 1.431 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Jag Operations Inc
Po Box 628
Russell KS, 67665
ATTN: Mike Bair

22-13s-15w Russell KS

Olson #2

Job Ticket: 53949

DST#: 3

Test Start: 2013.08.18 @ 21:48:00

GENERAL INFORMATION:

Formation: **LKC "H,I,J"**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 23:54:30
 Time Test Ended: 04:40:30
 Interval: **3184.00 ft (KB) To 3236.00 ft (KB) (TVD)**
 Total Depth: 3236.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Reset)
 Tester: Cody Bloedorn
 Unit No: 53
 Reference Elevations: 1879.00 ft (KB)
 1871.00 ft (CF)
 KB to GR/CF: 8.00 ft

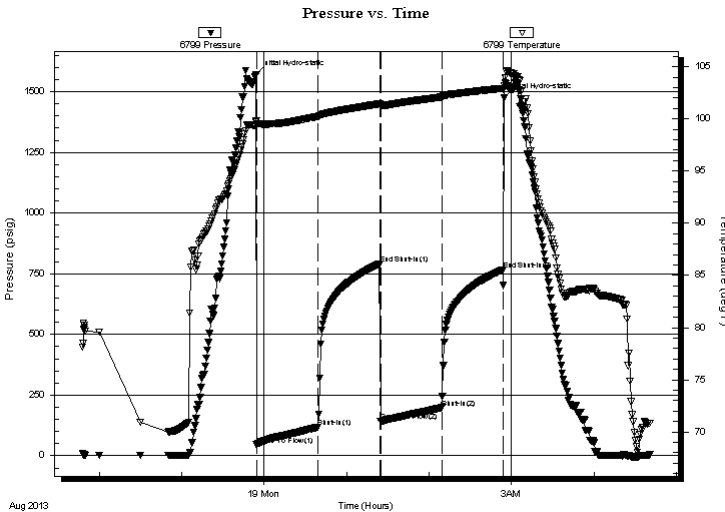
Serial #: 6799

Inside

Press @ Run Depth: 197.96 psig @ 3222.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2013.08.18 End Date: 2013.08.19 Last Calib.: 2013.08.19
 Start Time: 21:48:05 End Time: 04:40:29 Time On Btm: 2013.08.18 @ 23:54:15
 Time Off Btm: 2013.08.19 @ 02:54:30

TEST COMMENT: 45 - IF- B.O.B. in 12 minutes
 45 - IS- 1/4" return
 45 - FF- B.O.B. in 12 minutes
 45 - FS- 1/4" return

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1571.00	99.77	Initial Hydro-static
1	44.92	99.42	Open To Flow (1)
45	118.37	100.23	Shut-In(1)
90	789.35	101.44	End Shut-In(1)
91	141.94	101.27	Open To Flow (2)
135	197.96	102.09	Shut-In(2)
180	766.76	102.93	End Shut-In(2)
181	1474.19	103.17	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
434.00	GMW, 10%G, 30%M, 60%W	6.09
20.00	Free Oil, 100%O	0.28
0.00	248' of G.I.P.	0.00

* Recovery from multiple tests

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jag Operations Inc

22-13s-15w Russell KS

Po Box 628
Russell KS, 67665

Olson #2

Job Ticket: 53949

DST#: 3

ATTN: Mike Bair

Test Start: 2013.08.18 @ 21:48:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 60.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.60 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
434.00	GMW, 10%G, 30%M, 60%W	6.088
20.00	Free Oil, 100%O	0.281
0.00	248' of G.I.P.	0.000

Total Length: 454.00 ft Total Volume: 6.369 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

