



1158699

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

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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 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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

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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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/>

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

Sam Brownback, Governor

September 17, 2013

Elizabeth Brinkmeyer
Energex Kansas, Inc.
2038 S. PRINCETON ST., STE B
OTTAWA, KS 66067

Re: ACO1
API 15-059-26393-00-00
THOELE SOUTH BSP-TS46
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,
Elizabeth Brinkmeyer



DRILL LOG

Operator License # 33741

API # 15-059-26393-00-00

Operator Energex Kansas

Lease Name Thoele South

Address 2038 S. Princeton St., Ste B
Ottawa, KS 66067

Well # BSP-TS46

Contractor JTC Oil, Inc.

Spud Date 6/27/13 Cement 7/09/13

Contractor License 32834

Location _____ of _____

T.D. 920 T.D. of Pipe 890

_____ feet from _____

Surf. Pipe Size 7" Depth 20'

_____ feet from _____

Kind of Well Production

County Franklin

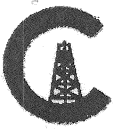
Thickness	Strata	From	To	Thickness	Strata	From	To
2	Soil	0	2	23	Shale	188	211
5	Clay	2	7	4	Lime	211	215
20	Lime	7	27	4	Shale	215	219
5	Shale	27	32	6	Red Bed	219	225
2	Red Bed	32	34	34	Shale	225	259
13	Shale	34	47	14	Lime	259	273
4	Lime	47	51	8	Shale	273	281
10	Shale	51	61	33	Lime	281	314
29	Lime	61	90	6	Black Shale	314	320
75	Shale	90	165	23	Lime	320	343
23	Lime	165	188	5	Coal	343	348

12	Lime	348	360
152	Shale	360	512
5	Lime	512	517
8	Shale	517	525
17	Lime	525	542
6	Shale	542	548
10	Sand	548	558
24	Shale	558	582
3	Coal	582	585
3	Shale	585	588
7	Lime	588	595
13	Shale	595	608
3	Lime	608	611
13	Black Shale	611	624
11	Lime	624	635
17	Shale	635	652
2	Lime	652	654
4	Coal	654	658
5	Lime	658	663
2	Lime Oil	663	665 OK
3	Lime Oil	665	668 Good
3	Lime Oil	668	671 Good
2	Shale	671	673
2	Coal	673	675

13	Sand	675	688
20	Shale	688	708
28	Black Shale	708	736
2	Oil Sand	736	738 OK
2	Oil Sand	738	740 Good
2	Oil Sand	740	742 V-Good
2	Oil Sand	742	744 V-Good
1	Oil Sand	744	745 Broken
17	Shale	745	762
2	Coal	762	764
7	Shale	764	771
1	Lime	771	772
6	Shale	772	778
8	Sand	778	786
6	Shale	786	792
2	Coal	792	794
13	Shale	794	807
23	Sand/Shale	807	830
4	Shale	830	834
1	Lime	834	835
7	Shale	835	842
8	Sand	842	850
51	Shale	850	901
6	White Sand	901	907

13

907 920



CONSOLIDATED
Oil Well Services, LLC

260425

TICKET NUMBER 42153

LOCATION Ottawa KS

FOREMAN Fred Maden

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
7-9-13	2579	So Thoele #BSP-73-46	NW 29	18	21	FR
CUSTOMER <u>Energies Resources Inc</u>						
MAILING ADDRESS <u>10975 Grandview Dr</u>						
CITY <u>Overland Park</u>	STATE <u>KS</u>	ZIP CODE <u>66210</u>				
JOB TYPE <u>Long string</u>	HOLE SIZE <u>6</u>	HOLE DEPTH <u>920'</u>	CASING SIZE & WEIGHT <u>2 7/8 EUE</u>			
CASING DEPTH <u>870'</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>2 1/2" Plug</u>			
DISPLACEMENT <u>5.17</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>5 BPM</u>			

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fred Mad		
495	Hoibac		
389	Kittar	Dormas	
548	Mikha		

REMARKS: Held crew meeting. Establish pump rate. Mix Pump 100 # Gel Flush Mix + Pump 124 sks 50/50 Poz Mix Cement 2% Gel 5% Salt 1/2 # Pheno Seal/sk. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to 800 PSI. Release pressure to set float valve. shut in casing.

JTC Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1065 ⁰⁰
5406		MILEAGE		N/C
5402	870	Casing footage		N/C
5407	1/2 Minimum	Ton Miles	548	184 ⁰⁰
5502C	1 1/2 hr	80 BBL Vac Truck.	369	135 ⁰⁰
1127	124 SKS	70/30 Poz Mix Cement		1655 ⁴⁰
1118B	319 #	Premium Gel		70 ¹⁵
1111	251 #	Granulated Salt		97 ⁸⁹
1107A	62 #	Pheno Seal		83 ²⁰
4402	1	2 1/2" Rubber Plug		29 ⁵⁰
			<input checked="" type="checkbox"/>	completed
			7.65%	SALES TAX
				ESTIMATED
				TOTAL
				148 ¹⁶¹
				3488 ⁸³

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ 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.