

Kansas Corporation Commission Oil & Gas Conservation Division

1162976

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

Name: Address 1:	OPERATOR: License #	API No. 15
Address 2:	Name:	Spot Description:
City:	Address 1:	SecTwpS. R 🔲 East 🗌 West
Contact Person:	Address 2:	Feet from North / South Line of Section
NR	City:	Feet from _ East / _ West Line of Section
CONTRACTOR: License # County: Name: Wellsite Geologist: Purchaser: Posignate Type of Completion: New Well Re-Entry Workover Gas D&A ENHR SIGW Gas D&A ENHR SIGW Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: 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. If Workover/Re-entry: Old Well Info as follows: Original Comp. Date: Original Total Depth: Conv. to GSW Depening Re-perf. Conv. to GSW Departing method used: Location of fluid disposal if hauled offsite: Coperator Name: Lease Name: License #: License #: County: Permit #: Caps County: Permit #: County: Pe	Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Lease Name:	Phone: ()	□NE □NW □SE □SW
Wellsite Geologist:	CONTRACTOR: License #	County:
Purchaser:	Name:	Lease Name: Well #:
Designate Type of Completion: New Well Re-Entry Workover Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. If Workover/Re-entry: Old Well Info as follows: Original Comp. Date: Deepening Re-perf. Conv. to ENHR Conv. to GSW Plug Back: Plu	Wellsite Geologist:	Field Name:
New Well	Purchaser:	Producing Formation:
New Well	Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
Oil		, ,
Well Name:	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:
Well Name:Original Total Depth:	Operator:	
Original Comp. Date: Original Total Depth: bbls 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 #: GSW Permit #: Original Total Depth: bbls Chloride content: ppm Fluid volume: bbls Dewatering method used: bewatering method used: Dependence: bolt print disposal if hauled offsite: Operator Name: License #: Quarter Sec Twp S. R East West County: Permit #:	Well Name:	
GSW Permit #: County: Permit #:	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 #:
	Spud Date or Date Reached TD Completion Date or	

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

1162976

Operator Name:			Lease Name	e:			Well #:	
Sec Twp	S. R	East West	County:					
time tool open and clor recovery, and flow rate	sed, flowing and shut-	base of formations per in pressures, whether s i, along with final chart(vell site report.	hut-in pressure	reached sta	atic level,	hydrostatic press	sures, bottom h	ole temperature, fluid
Drill Stem Tests Taken (Attach Additional S		☐ Yes ☐ No		Log	Formation	n (Top), Depth an	d Datum	Sample
Samples Sent to Geol	logical Survev	Yes No	1	Name			Тор	Datum
Cores Taken Electric Log Run Electric Log Submittee (If no, Submit Copy	d Electronically	Yes No Yes No Yes No						
List All E. Logs Run:								
		CASING Report all strings set-	RECORD		Used te. production	on, etc.		
Purpose of String	Size Hole	Size Casing	Weight	Se	etting	Type of Cement	# Sacks	Type and Percent Additives
	Drilled	Set (In O.D.)	Lbs. / Ft.		Depth	Cement	Used	Additives
		ADDITIONAL	CEMENTING /	SQUEEZE I	RECORD			
Purpose: —— Perforate	Purpose: Depth Type of Cement Top Bottom			# Sacks Used Typ			Percent Additives	
Protect Casing Plug Back TD								
Plug Off Zone								
Shots Per Foot	PERFORATIOI Specify Fo	s Set/Type forated			ture, Shot, Cement Count and Kind of Ma	Cement Squeeze Record and of Material Used)		
TUBING RECORD:	Size:	Set At:	Packer At:	Liner	Dun:			
TOBING RECORD.	Size.	Get At.	racket At.	Linei	_	Yes No		
Date of First, Resumed	Production, SWD or ENH	R. Producing Met	hod:	Gas Lift	t 🗌 0	ther (Explain)		
Estimated Production Per 24 Hours	Oil Bi	ols. Gas	Mcf	Water	Bk	ols. (Gas-Oil Ratio	Gravity
DISPOSITIO			METHOD OF CO.	ADI ETIONI			DRODUCTIO	MINITEDVAL.
DISPOSITION Vented Sold	METHOD OF CON \Box Perf. \Box D	ually Comp.	Com	nmingled	FRUDUCIIC	N INTERVAL:		
(If vented, Sub		Open Hole Other (Specify)		bmit ACO-5)		nit ACO-4)		

R.J. Enterprise 22082 NE Neosho RD Garnett, KS 66032

Stewart 13-A

			Start 6-11-2013
2	soil	2	Finish6-12-2013
6	sand/stone	8	
110	lime	118	
165	shale	283	
10	lime	293	
70	shale	363	
30	lime	393	
40	shale	433	set 20' 7"
18	lime	451	ran 691.8' 2 7/8
7	shale	458	cemented to surface 72 sxs
7	lime	465	
94	shale	559	
2	lime	561	
65	shale	626	
16	sandy shale	642	
2	sandy shale	644	odor
3	oil sand	647	good show
1	limey sand	648	show
3	sandy shale	651	show
3	oil sand	654	good show
44	shale	698	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N Maple Garnett, KS 66032 {785} 448-7106 FAX {785} 448-7135

Customer Copy INVOICE

THIS COPY MUST REMAIN AT MERCHANT AT ALL TIMES!

Page: 1 Invoice: 10171572 Special 12:12:55 Time: Instructions : Ship Date: 05/05/11 Invoice Date: 05/05/11 Sale rep #: MIKE REPRINT Due Date: 06/08/11 Acct rep code: Sold To: ROGER KENT Ship To: ROGER KENT 22082 NE NEOSHO RD (785) 448-6995 NOT FOR HOUSE USE **GARNETT, KS 66032**

(785) 448-6995

	Customer #: 0000357			57	Customer PO:				Order By:] 871-
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TOTAL \$3887.70