

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1167436

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 & LEA	SF

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from Cast / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
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:
Image: Non-Non-Non-Non-Non-Non-Non-Non-Non-Non-	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         feet depth to:       w/       sx cmt         Drilling Fluid Management Plan       (Data must be collected from the Reserve Pit)       Chloride content:       ppm         Chloride content:       ppm       Fluid volume:       bbls
Conv. to GSW         Plug Back:       Plug Back Total Depth         Commingled       Permit #:         Dual Completion       Permit #:         SWD       Permit #:         ENHR       Permit #:         GSW       Permit #:	Dewatering method used:Location of fluid disposal if hauled offsite: Operator Name:License #:License #:License #:QuarterSecTwpS. R East West County: Permit #:
Spud Date or Recompletion Date         Date Reached TD         Completion Date or 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	1167436
Operator Name:	Lease Name:	Well #:
Sec TwpS. 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 (Attach Additional She	eets)	Yes No	L	0	n (Top), Depth an	d Datum Top	Sample Datum
Samples Sent to Geolog	gical Survey	Yes No					
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	YesNoYesNoYesNo					
List All E. Logs Run:							
		CASING		ew Used			
		Report all strings set	-conductor, surface, inte	ermediate, producti	ion, 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: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					ement Squeeze Record I of Material Used)	Depth			
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner R	un:	No	
Date of First, Resumed F	Product	ion, SWD or ENH	۲.	Producing N	_	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
									Ι	
DISPOSITIO	DISPOSITION OF GAS: METHOD OF COMPLE			TION:		PRODUCTION INTE	RVAL:			
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit )		Commingled (Submit ACO-4)		
(If vented, Subi	mit ACC	)-18.)		Other (Specify	)					

CONSOLIDATED
Oil Well Services, LLC

262233

TICKET NUMBER 42486 LOCATION Offqueg FOREMAN Slan Made

520-431-9210 or 800-467-8676	D Box 884 Chanu	te, KS 66720
	0-431-9210 or 80	0-467-8676

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NU	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-10-13	4019	W: Ison P	·Z	NEY	18	22	Mi
CUSTOMER	<u>∧·</u> /	•		TRUCK #	DRIVER	TRUCK #	
MAILING ADDRE	ESS	<i>₩</i> , - <b></b>		5%	AL M.	CSC DON	DRIVER
35688	Pherm	Creek		368	ArINOD	Jaren	Mee
CITY		STATE ZIP CODE		370	Ke: Can		
DSGWC	tomie	KS 66064		503	Dandet		
JOB TYPE	ng string	HOLE SIZE 51/8	HOLE DEPTH	1 62D	CASING SIZE & W	EIGHT 21/	8
CASING DEPTH	613	DRILL PIPE	TUBING			OTHER	
SLURRY WEIGH	нт <u> </u>	SLURRY VOL	WATER gal/s		CEMENT LEFT in		5
SLURRY WEIGH	2/10	SLURRY VOL			RATE 460		5
	3/2	DISPLACEMENT PSI BDT		200			5
DISPLACEMENT	eld nee	DISPLACEMENT PSI BDI		200	RATE 460		5 d fr
DISPLACEMENT	- 312 eld nee eld nee	DISPLACEMENT PSI_BDI Hus, Establ Hgol follo	2 MIX PSI_6	200	RATE 460 n casing		d frage
DISPLACEMENT	eld nee ed 100 ed 100	DISPLACEMENT PSI_BDI Hus, Establ Hgol follo	2 MIX PSI_6 L'shed r wed b culated	ate dow	RATE 460 n casing		5 d fr
displacement <u>remarks: }} Pum P</u>	eld nee ed 100 ed 100	DISPLACEMENT PSI_BDI Hug, Eglad BGOL Hollo SOCK. Cir	2 MIX PSI_6 L'shed r wed b culated	ate dow	RATE 460 n casing		d frage

			Alu 1	Hall	
CCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or P	RODUCT	UNIT PRICE	TOTAL
101	1	PUMP CHARGE	368		10850
406		MILEAGE	368		
702	613	casing testage	368		
707	Vanin	ton miles	523		18400
3024	12	80 290			13500
12/2	72#	owc			1477.00
IDR	107	201	a		72/2
rou-	18	Charles (			WW UL
1702	18	2 2 plus			2950
		· · · · · · · · · · · · · · · · · · ·			
				6164	
			÷	SALES TAX	112.33
3737	R= 1 11			ESTIMATED TOTAL	30342

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 service, identified on this form

	Operator License #	32834	
	Operator	JTC Oil, Inc.	
	Address	P. O. Box 24386	
	City	Stanley, KS 66283	
	Contractor	JTC Oil, Inc.	
	Contractor License #	32834	
	T.D.	640	
	T.D. of pipe	613	
	Surface pipe size	7"	
	Surface pipe depth	20'	
	Well Type	Production	
	Driller's		
Thickness	Strata	From	То
25	Dirt/Clay	0	25
7	Stone Mix	25	32
12	Lime	32	44
11	Shale	44	55
27	Lime	55	82
6	Black Shale	82	88
21	Lime	88	109
5	Black Shale	109	114
15	Lime	114	129
166	Shale	129	295
11	Lime	295	306
54	Shale	306	360
8	Lime	360	368
12	Shale	368	380
3	Lime	380	383
19	Shale	383	402
10	Lime	402	412
18	Shale	412	430
6	Lime	430	436
6	Shale	436	442
30	Sandy Shale	442	472
11	Shale	472	483
30	Black Shale	483	513
4	Sandy Shale	513	517
1	Shale	517	518
1	Tiny Oil Sand	518	519
2	Tiny Oil Sand	519	521
2	Tiny Oil Sand	521	523
2	Tiny Oil Sand	523	525
35	Shale	525	560
2	Oil Sand	560	562
2	Oil Sand	562	564
2	V-Good	564	566
2	V-Good	566	568

API # Lease Name Well #	15-121-2958 Wilson A P-2	5-00-00	)
1.00	9/5/2013 9/10/2013 Sec 4 feet from feet from Miami	T 18 N E	R 22 line line

Maybe

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