



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1168580

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      Date Reached TD      Completion Date or  
Recompletion Date           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: \_\_\_\_\_

1168580

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 ☐ Yes ☐ No  
(Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No

Electric Log Submitted Electronically ☐ Yes ☐ No  
(If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample  
Name Top Datum

CASING RECORD ☐ New ☐ 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

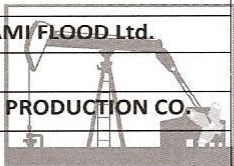
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
____ Perforate				
____ Protect Casing				
____ Plug Back TD				
____ Plug Off Zone				

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

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> 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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Lease:	Tarr II	
Owner:	DIAMOND MIAMI/FLOOD Ltd.	
OPR #:	5876	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface: 20' of 7"	Cemented: 5 Sacks	Hole Size: 9 7/8"
Longstring: 672' 2 7/8 rd	Cemented: 86	Hole Size: 5 5/8



**Dale Jackson Production Co.**  
**Box 266, Mound City, Ks 66056**  
**Cell # 620-363-2683**  
**Office # 913-795-2991**



Well #: DT-28
Location: SW,NE,SW,SW,S19,T16,R22
County: MIAMI
FSL:909
FEL: 985
API#: 15-121-29542-00-00
Started: 7/25/13
Completed: 7/26/13
TD: ' FT.689'

SN: NONE

Packer: 671'RAG

Plugged:

Bottom Plug:

## Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	TOP SOIL	34	554	SHALE
10	12	CLAY	1	555	LIME
17	29	LIME	4	559	SHALE
2	31	SHALE	8	567	LIME
4	35	BLACK SHALE	23	590	SHALE
10	45	LIME	1	591	COAL
6	51	SANDY SHALE	4	595	SHALE
4	55	SHALE	5	600	LIME
16	71	LIME	4	604	OIL SAND(SOME SHOW)(FAIR BLEED)
3	74	SHALE	14	618	SHALE
3	77	RED BED	3	621	LIME
4	81	SHALE	2	623	COAL
10	91	SAND(DRY)	10	633	SHALE
5	96	SANDY SHALE	4	637	LIME
16	112	LIME	8	645	SHALE
4	116	SHALE	4	649	LIME
11	127	SAND(DRY)	5	654	SHALE
9	136	SHALE	1	655	LIME
17	153	SAND(DRY)	10	665	SHALE
52	205	SHALE	1	666	LIME
20	225	LIME	1	667	SHALE
7	232	SHALE	3	670	SAND(DRY)
14	246	SANDY SHALE	1	671	LIME
9	255	SHALE	9	680	OIL SAND(SOME SHOW)(POOR BLEED)
4	259	LIME	1	681	LIME
23	282	SHALE	5	686	OIL SAND(VERY SHALEY)(POOR BLEED)
2	284	SAND(DRY)	TD	689	SHALE(OIL SAND STRK.)
20	304	LIME			
16	320	SHALE			SURFACE 7/25/13 LONGSTRING 671' 2 7/8" 8RD
24	344	LIME			SET TIME 3:30P.M. TD689'
4	348	SHALE			CALLED 1:15P.M. RUSSELL SET TIME 2:30P.M. 7/26/13
6	354	BLACK SHALE			CALLED 1:20P.M. JOHN
19	373	LIME			
4	377	BLACK SHALE			
13	390	LIME			
24	414	SHALE			
11	425	SANDY SHALE (FAIR OIL SHOW)			
76	501	SHALE			
8	509	SANY SHALE(OIL SHOW)			
10	519	SHALE			
1	520	BLACK SHALE			

FROM :

FAX NO. :19132944954

Jul. 25 2013 07:53AM P1

LOADED BY	DELIVERED BY	DELIVERY DATE
CHECKED BY	DATE ORDERED	SHIP VIA
07/25/13		07:52 MT

# MIAMI LUMBER, INC.

1014 N. Pearl, P.O. Box 362, Paola, Kansas 66071

2428956

913-294-2041

INVOICE

DIAMOND EXPLORIT ON THE	PAOLA, KANSAS	66071
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OUR PO: 107232

TERMS: DUE THE 10TH

FROM: 0 4066811

CUST#: 102040.0000

LN	QTY	DESCRIPTION	ITEM #	UNITS	PRICE	AMOUNT
1	240	004 FLY ASH CONCRETE MIX	700113200	240	5.77 50	1384.80
2	240	PORTLAND CEMENT TYPE 1 571 840	700110500	240	3.40 00	816.00
3	24	1 1/2" 4000 POLLET	700150000	24	15.00 00	360.00
4		**** DELIVERED TO JOB SITE WITH				
5		EACH PALLET WRAPPED—PAYMENT				
6		DUE THE FOLLOWING DAY *****				
7						
					SUBTOTAL	4220.80
					PAOLA SALES TAX	665.62
					TOTAL	4886.42



MIAMI  
LUMBER, INC.

*E. Miami*  
*Ch 4349*  
*7/26/2013*

All accounts due 10 days receipt of statement - overdue amounts subject to service charge, at  
 lesser of 1.5 percent per month, or amount per applicable law.  
 Termination Of Credit - No additional credit purchases will be allowed to any account that is  
 past due.

RECEIVED BY

STATEMENT COPY



# Billing Statement

Invoice #

Dale Jackson Production  
Box 266, Mound City, Ks 66056  
Cell # 620-363-2683  
Office and Fax # 913-795-2991

Date	Well#	Lease Name	Work Description	Price	Total
7/19/13	DJ-12	TARR II	WELL PLUGGING		
			PLUGGED 2" WELL THROUGH 1" PIPE CIRCULATED CEMENT TD TO SURFACE 15 SACKS		\$200.00
7/26/13	DT28	TARR II	689' 5 5/8" HOLE	\$8.00/FT	\$5512.00
			CEMENT 86 SACKS		\$600.00
			PORTABLE PITS		\$400.00
			TARR I WELL #DT-28 TOTAL		\$6512.00
7/22/13	W-3	TARR I	720' 5 5/8" HOLE	\$8.00/FT	\$5760.00
			CEMENT 94 SACKS		\$600.00
			PORTABLE PIT		\$400.00
			TARR I WELL #W-3 TOTAL		\$6760.00
7/25/13	DM-3	MOLL	675' 5 5/8" HOLE	\$8.00/FT	\$5400.00
			CEMENT 91 SACKS		\$600.00
			PORTABLE PIT		\$400.00
			MOLL WELL # DM-3 TOTAL		\$6400.00
7/24/13	EH-10	HENNING	675' 5 5/8" HOLE	\$8.00/FT	\$5400.00
			CEMENT 89 SACKS		\$600.00
			PORTABLE PIT		\$400.00
			HENNING WELL# EH-10 TOTAL		\$6400.00
7/23/13	EH-11	HENNING	710' 5 5/8" HOLE	\$8.00/FT	\$5680.00
			CEMENT 110 SACKS		\$600.00
			PORTABLE PITS		\$400.00
			HENNING WELL # EH-11 TOTAL		\$6680.00
			<b><u>TOTAL BILLING 7/27/13</u></b>		<b><u>\$32,952.00</u></b>