Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1199574

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #		API No. 15
Name:		Spot Description:
Address 1:		
Address 2:		Feet from Dorth / South Line of Section
City: State: Zip:	+	Feet from East / West Line of Section
Contact Person:		Footages Calculated from Nearest Outside Section Corner:
Phone: ()		
CONTRACTOR: License #		GPS Location: Lat:, Long:
Name:		(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84
Purchaser:		County:
Designate Type of Completion:		Lease Name: Well #:
New Well Re-Entry	Workover	Field Name:
		Producing Formation:
		Elevation: Ground: Kelly Bushing:
Gas D&A ENHR	SIGW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)		Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):		Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info as follows:		If yes, show depth set: Feet
Operator:		If Alternate II completion, cement circulated from:
Well Name:		feet depth to:w/sx cmt.
Original Comp. Date: Original Total I	Depth:	
Deepening Re-perf. Conv. to ENHR		Drilling Fluid Management Plan
Plug Back Conv. to GSW	Conv. to Producer	(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 #:
Spud Date or Date Reached TD Co	ompletion Date or	Quarter Sec TwpS. R East West
•	ecompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

	Page Two	1199574			
Operator Name:	Lease Name:	Well #:			
Sec TwpS. R East West	County:				
INCTRUCTIONS: Chave important tang of formations panetrated	Datail all carea Bapart al	I final conice of drill stome tests giving interval tested, time test			

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 (Attach Additional Sheets)		Yes No		-	Formation (Top), Depth and		Sample	
Samples Sent to Geolog	gical Survey	Yes No	Nam	9		Тор	Datum	
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No						
List All E. Logs Run:								
			RECORD Ne		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 / SQU	EEZE RECORD				
Purposo:	Denth							

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

No

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)

(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 (Amount and Kind of Material Used)			Depth		
TUBING RECORD:	Siz	re:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed	Producti	on, SWD or ENHR.		Producing M	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bbls	5.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:							PRODUCTION IN	TERVAL:		
Vented Sold Used on Lease (If vented, Submit ACO-18.)				Open Hole Other <i>(Specify)</i>	Perf.	Uually (Submit)	,	Commingled (Submit ACO-4)		

LEIS OIL SERVICES



1410 150th Rd. • Yates Center, Kansas 66783 • (620) 212-0752



Operator License #: 9267	API #: 15-003-26001-00-00					
Operator: JRC Oil Co, Inc.	Lease: Cleveland					
Address: PO Box 426 Garnett KS 66032	Well #: CD-46					
Phone: 785-448-8112	Spud Date: 10-02-13 Completed: 10-03-13					
Contractor License: 32079	Location: SW-NE-NE-NW of 33-20-21E					
T.D.: 728 T.D. of Pipe: 725 Size: 2.875"	4785 Feet From South					
Surface Pipe Size: 7" Depth: 21'	3250 Feet From East					
Kind of Well: Oil	County: Anderson					

LOG

Thickness	Strata	From	То	Thickness	Strata	From	То
26	Soil/Clay/Shale	0	26	3	Lime	577	580
1	Lime	26	27	18	Shale	580	598
5	Shale	27	32	52	Oil Sand	598	650
25	Lime	32	57	78	Shale	650	728
26	Shale	57	83				
2	Lime	83	85				
48	Shale	85	133				
10	Lime	133	143				
6	Shale	143	149				
40	Lime	149	189		1		
7	Shale	189	196				
24	Lime	196	220				han a ser a ser
5	Shale	220	225				
2	Lime	225	227				
4	Shale/Black Shale	227	231		7		
4	Lime	231	235				
178	Shale	235	413				
3	Lime	413	416				
4	Shale	416	420				
8	Lime	420	428				
51	Shale	428	479		•		
6	Lime	479	485				
18	Shale	485	503		T.D.		728
3	Lime	503	506		T.D. of Pipe		725
28	Shale	506	534				
9	Lime	534	543				
23	Shale	543	566				
2	Lime	566	568			++	
9	Shale	568	577		9 8		

P.C. Iola	802 N. Industrial Rd. P.O. Box 664 Jola, Kansas 66749 Phone: (620) 365-5588 IR602 J.R.C. OIL COMPANY, INC. 25558 NE WILSON RD. GRRNETT KS 66032-9622									
	TIME	FORMULA	LOAD SIZE	YARDS ORDERED	5 501	DRIVER/TRUCK	ATE	PLANT/TRANSACTION #		
10:3	3:16a	WELL	9.00 yd	90.00 yd	0.00	35	0.00	ANDCO		
	DATE	o Date	LOAD #	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER		
1 kj - 1	7-13	oday	. 2	18.00 yd	25415	G/yd Ø.Ø	4.00≁in	35292		
CAUSE Contac Attentic CONCR LEAVIN TELEPH The unc any sun All accoo Not Res Material A \$25 \$	PROPERTY DAMAGE RELEASE Contains Pontiand Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Proinged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water, If Inflation Persists, Get Medical Attention. KEEP CHILDREN AWAY. PROPERTY DAMAGE RELEASE Drophysical Contact With Skin. In Case of Contact With Skin. In									
QU	JANTITY	CODE	DESCRIPTION				UNIT PRICE	EXTENDED PRICE		
	9.00 WELL WELL (10 SACKS PER UNIT) 18.00 2.50 1.75 TRUCKING TRUCKING CHARGE 5.00 \$495.00 9.00 MIX&HAUL MIXING & HAULING 18:00 \$225.00 49625									
RETURNE	D TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CY	LINDER TEST TAKEN	TIME ALLOWED				
12 LEFT 10:	37 PLANT 49	ARRIVED JOB	START UNLOADING	1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER	6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	TIME DUE	ADDITIONAL CHARGE 1	1×# 6244		
	OUND TRIP	TOTAL AT JOB	UNLOADING TIME			DELAY TIME	ADDITIONAL CHARGE 2	\$ 87869		