

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1222517

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:	Sec. Twp. S. R. East West					
Address 2:	Feet from North / South Line of Section					
City: State: Zip:+	Feet from _ East / _ West Line of Section					
Contact Person:	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()	□NE □NW □SE □SW					
CONTRACTOR: License #	GPS Location: Lat:, Long:					
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)					
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84					
Purchaser:	County:					
Designate Type of Completion:	Lease Name: Well #:					
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:					
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:	Producing Formation: Elevation: Ground: Kelly Bushing: Feet Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet					
Operator:	If Alternate II completion, cement circulated from: sx cmt.					
Well Name: Original Comp. Date: Deepening Re-perf. Conv. to ENHR Conv. to SWD Plug Back Conv. to GSW Conv. to Producer Commingled Permit #: Dual Completion Permit #:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume: bbls Dewatering method used:					
SWD Permit #:	Location of fluid disposal if hauled offsite:					
☐ ENHR Permit #: ☐ GSW Permit #:	Operator Name: License #:					
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

Page Two



Operator Name:			L	ease Name: _			Well #:	
Sec Twp	S. R	East We	est C	County:				
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres	sures, whether sh	ut-in pressur	e reached stati	c level, hydrosta	tic pressures, bott		rval tested, time tool erature, fluid recovery,
Final Radioactivity Lo files must be submitted					ogs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taker (Attach Additional		Yes [No	L	_	on (Top), Depth an		Sample
Samples Sent to Geo	logical Survey	Yes	No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes Yes	No No					
List All E. Logs Run:								
		(CASING REC	ORD Ne	ew Used			
		· ·		ıctor, surface, inte	ermediate, producti	1		I
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
		ADD	ITIONAL CEN	MENTING / SQL	JEEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cem	ent #	Sacks Used		Type and P	ercent Additives	
Perforate Protect Casing	100 20111111							
Plug Back TD Plug Off Zone								
1 lag on zono								
Did you perform a hydrau	ulic fracturing treatment	on this well?			Yes	No (If No, ski	o questions 2 ar	nd 3)
Does the volume of the to		•				_ ` ` '	p question 3)	
Was the hydraulic fractur	ing treatment information	on submitted to the c	hemical disclo	sure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)
Shots Per Foot		ION RECORD - Bri Footage of Each Into				cture, Shot, Cement		d Depth
	, ,	<u> </u>			,		,	·
TUBING RECORD:	Size:	Set At:	Pa	acker At:	Liner Run:			
						Yes No		
Date of First, Resumed	Production, SWD or Ef		cing Method: owing	Pumping	Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. G	as Mcf	Wate	er Bi	ols. G	as-Oil Ratio	Gravity
DIODOCITI	ON OF CAS:		N 4 - T - 1		TION:		PPODUOTIO	ON INTERVAL.
Vented Solo	ON OF GAS: Used on Lease	Open Ho		IOD OF COMPLE \Box		nmingled	PRODUCTION	ON INTERVAL:
	bmit ACO-18.)	Other (Si	necify)	(Submit		mit ACO-4)		

Contractor		Operator License # Operator Address City	32834 JTC Oil, Inc. 35790 Plum Cree Osawatomie, KS	API # Lease Name Well #		15-121-30464-00-00 Hahn BSP-HN7			
Surface pipe size 7" County Miami W line		Contractor Contractor License #	JTC Oil, Inc. 32834		Cement D		7/16/2014	T 18	
Surface pipe depth 20'		T.D. of pipe				1485	feet from	N	line
Thickness Strata From To		Surface pipe size	7"			1815	feet from	W	line
Thickness Strata From To S soil 0 5 3 lime 5 8 21 shale 8 29 5 lime 29 34 4 red bed 34 38 38 shale 38 76 15 lime 76 91 10 shale 91 101 30 lime 101 131 7 black shale 131 138 21 lime 188 159 5 coal 159 164 12 lime 164 176 142 shale 176 318 22 lime/shale 318 340 14 lime 340 354 4 sand/shale 354 358 3 sand 358 361 3 sand 361 364 3 sand 364 366 37 shale 366 403 8 lime 403 411 10 shale 411 424 14 black shale 421 424 14 black shale 421 424 14 black shale 451 461 4 lime 461 465 4 coal 465 469 4 lime 469 473 7 shale 373 480 2 oil sand 480 482					County		Miami		
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2	oil sand	486	488
2	oil sand	488	490
2	sand/shale	490	492
52	shale	492	544
2	oil sand	544	546
2	oil sand	546	548
2	oil sand	548	550
2	sandy/shale	550	552
2	sandy/shale	552	554
16	black shale	554	570
30	shale	570	600



44102

2 69737

TICKET NUMBER LOCATION Oxtawa FOREMAN Fred Mad

PO Box 884, CI	hanute, KS 667 or 800-467-8676	20	LD TICKE	T & TREA CEMEN		TREP	ORI		
DATE	CUSTOMER#		L NAME & NUM		17.50	CTION	TOWNSHIP	RANGE	COUNTY
7.16.14	4015	Hahn	# BSP.	HN7	N	23	18	21	mı
CUSTOMER									
77	TC Oil	Juc		4		JCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	- 1					112	FreMad		
35688	Plum C	Veek 12d				195	Hor Bec		
CITY		STATE				370	Mart Coc		
Osawa	tomie_	KS	66064	_		48	Dus Web	7.	T .1 ~
JOB TYPE LO	ongstring	HOLE SIZE	6	HOLE DEPT	н <u>6</u>	00	CASING SIZE & W		OE
CASING DEPTH	576	DRILL PIPE		_TUBING				OTHER	11
SLURRY WE!GI	нт	SLURRY VOL_		WATER gal/s	sk				Plus
DISPLACEMEN'	T 3.35BBL	DISPLACEMEN	IT PSI	MIX PSI			RATE 4 8 P.		
REMARKS: A	. / 1	N Safet		. Esta	blish	DUMP	rate. Mix	Pump 100	stall_
Flush.		DUMU &	O SKS O	owe C	emen	* 34	14 /4 F	10.50al/5/	٠,
Ceme		1 face.	Flush.	Dumax	Ines	cle	m. Displa	e 272" Rus	bber
	to Casing	TD. F	ressure	to 80	OFR	SIL R	eleose pre	ssure to	Sex
Floor			~ Casing						
,									
							1		
-T-	TC Drills	~					Lad Ma	la	
		9					/		
ACCOUNT	QUANITY	or UNITS	DI	ESCRIPTION of	of SERVIC	ES or PR	ODUCT	UNIT PRICE	TOTAL
5401		1	PUMP CHARG	GE			495		10850
5406		25 mi	MILEAGE				495		103.0
5402	S	76	Casina	Footoge					NIC
5407	13 moni	Mim	Ton V				548		122 57
55000	_	12 hr	80 BB		ruck		७७७		15000
1126		705KS	owe	Comen	*			138250	
1118B		00#	frem	on le	1			2200	
1.100								. 416	

ESTIMATED 2586.301 Ravin 3737 TOTAL DATE TITLE AUTHORIZTION

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

Less 30%

7.65%

SALES TAX