

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1234084

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.	TwpS. R	East West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □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:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Terrip. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore, Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		Feet
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Dlan	
☐ Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Pormit #:		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used: _		
SWD			Location of fluid disposal if	f hauled offsite:	
☐ ENHR					
GSW	Permit #:		Operator Name:		
_ _			Lease Name:	License #:_	
Spud Date or Date R	eached TD	Completion Date or	QuarterSec	TwpS. R	East West
Recompletion Date		Recompletion 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 Approved by: Date:



Operator Name:			Lease Name: _			Well #:	
Sec Twp	S. R	East West	County:				
open and closed, flow	ring and shut-in pressu	ormations penetrated. Eures, whether shut-in prediction of the pre	essure reached stat	ic level, hydrosta	tic pressures, bot		
		otain Geophysical Data a or newer AND an image		ogs must be ema	illed to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests Taker (Attach Additional S		☐ Yes ☐ No			on (Top), Depth ar		Sample
Samples Sent to Geo	logical Survey	Yes No	Nam	10		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING	RECORD N	ew Used			
		Report all strings set-			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 / SQI	IFEZE RECORD			
Purpose:	Depth Top Pottors	Type of Cement	# Sacks Used	JEEZE NEGOND	Type and P	ercent Additives	
Perforate Protect Casing Plug Back TD	Top Bottom						
Plug Off Zone							
	ulic fracturing treatment or			Yes		p questions 2 ar	nd 3)
		aulic fracturing treatment ex submitted to the chemical	=	? Yes [= ' '	p question 3) out Page Three	of the ACO-1)
Shots Per Foot		N RECORD - Bridge Plug ootage of Each Interval Per			cture, Shot, Cement		d Depth
	.,,						
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or ENF	HR. Producing Meth	nod:	Gas Lift 0	Other (Explain)		
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf Wat			Sas-Oil Ratio	Gravity
	ON OF GAS:	M Open Hole	METHOD OF COMPLI		mmingled	PRODUCTIO	DN INTERVAL:
Vented Sold	Used on Lease	Other (Specify)	Perf Dually (Submit		mmingled mit ACO-4)		

Form	ACO1 - Well Completion
Operator	JTC Oil, Inc.
Well Name	Cooper P-27
Doc ID	1234084

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	9	7	10	20	Portland	5	50/50 POZ
Production	5.625	2.875	8	740	Portland	83	50/50 POZ

	Operator License # Operator Address City	32834 JTC Oil, Inc. 35790 Plum Cree Osawatomie, KS		API # Lease Name Well #	15-121-304: Cooper P-27		0
	Contractor Contractor License #	JTC Oil, Inc. 32834		Spud Date	10/23/2014		
	T.D.	760'		Cement Date Location	11/3/2014 Sec 9	T 17	R 22
	T.D. of pipe	740'			feet from	S .	line
	Surface pipe size	7"			feet from	E	line
	Surface pipe depth	20'		County	Miami	_	IIIIC
	Well Type	Production		333,	· · · · · · · · · · · · · · · · · · ·		
	Driller's						
Thickness	Strata	From	То				
1	dirt	0	1				
11	lime	1	12				
92	shale	12	104				
18	lime	104	122				
18	shale	122	140				
5	lime	140	145				
7	shale	145	152				
6	lime	152	158				
39	shale	158	197				
15	lime	197	212				
10	shale	212	222				
27	lime	222	249				
10	shale	249	259				
17	lime	259	276				
5	shale	276	281				
12 167	lime	281	293				
9	shale Iime	293	460				
4	mix	460 469	469				
43	shale	473	473 516				
7	lime	516	523				
12	shale	523	535				
3	sandy shale	535	538	little oil			
4	shale	538	542	nede on			
14	lime	542	556				
4	shale	556	560				
12	lime mix	560	572				
44	shale	572	616				
2	sand	616	618	little oil			
20	Core 1	618	638				
2	little	618	620				
8	ok	620	628				
4	washed	628	632				

6	ok	632	638	
20	Core 2	638	658	
8	mostly shale	638	646	some oil
12	good	646	658	
20	Core 3	658	678	
17	good	658	675	
5	v-good	675	680	
10	good bleed	680	690	
3	little	690	693	
17	sandy shale	693	710	
2	coal	710	712	
48	shale	712	760	

144-14 20100000000

CEMENT FIELD TICKET AND THEATMENT REPORT

acostal/oc

omer ,					
12 . 2 13 was - 2 pm 's	TTC	State, County	HRANKLIN	Cement Type;	CLASS A
ура	W _P	Section	4	Excess (%)	1.4
omer Acct # ~	4015	TWP	:	Density	
0	cooper p-27	BRETHAT		Water Required	:
g Address	where the dept is dealling the said in the	; formation	102.11 1 - 15 - 15.70		
State		Tubing,	27/8 L	Sacks of Cement	
xde .	7	Drift Pipe		Slurry Volume	
A	The state of the s	Casing Size	INCH,	Displacement	4.2
200	2 to 10 to 1	Hole Size	2 7/8	Displacement PSF	300 . ""
1.00	college to the college of the colleg	Casing Depth!	5740 (3	The same is not a second or the same in th	
tch Location :	Eureka _n a	Hole Depth A		Rate and Allen	
SHE FREE	Gement Rump Charges and Mileage	Ollandin	The state of the state of the state of		The second second
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,085.00	
5406	EQUIPMENT MILEAGE (ONE-WAY)	'25	PER MILE	\$4.20	1,000,00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	Oree/A an	PER LOAD	\$368.00	\$ 105,00
0	mire, poet periodici (fatti made imero)	100000	0	\$0.00	\$368.00
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0		12 1 7 1 7 1	o.	\$0.00	Secretary Secretary
0			0	\$0.00	THE RESERVE TO SHARE THE PARTY OF THE PARTY
0		-	0		Sarato GNADE SE.
0		-	0	\$0.00	
	the strategies and the state of the state of			A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	
15.30 201	ement Chemicals and Water 2015-16-16-17	· · · · · · · · · · · · · · · · · · ·	College College Bridge	TUTTON I TOTAL	\$ 1,558.00
1126 N	MC. CEMENT (CAL SEAL) 8%OWC. 2% CAL.CLORIDE 2% GE	BOATE TO SHARE SHEET			the same of the sa
0	TO SERVICE SEAL) ONOTICE 2% CALCUMIDE 2% GE	83 · .	. 0	\$19.75	\$ 1,639.25
0		 	0	\$0.00	3
0		1	0	30,00	\$
0			0	\$0.00	S A TANK
0			0	\$0.00	\$ 1.600 000
0		· · · · · · · · · · · · · · · · · · ·	0	\$0.00	\$ 444
0			0	\$0.00	\$
0		-	0	\$0.00	\$
0			. 0	\$0.00	\$
0		****	. 0	\$0.00	\$
0		1,4 . 1	0	\$0.00	\$.
0		A 1"	0	\$0.00	\$ 491.78
23	CITY WATER (PER 1000 GAL)	2000	Per Gal	\$0:00	\$ 10 3 3 4
	GAT WATER (FER 1000 GAE)	2000	Per Gar	\$0.02	\$,34.60
C	ement Water Transports	MESS CONTRACTOR IN COME	- Se at 177 - Property and the second	Chemical Total	\$ 1,182.08
02C	80 BBL VACUUM TRUCK (CEMENT)	al Part of The San		THE LABOR TO STATE OF THE PARTY	
			DI MACHINI TOMON CORNA		
0	SO DOL VACOOM TROOK (CEMENT)		BL VACUUM TRUCK (CEM	\$90.00	\$ 180.00
Name and Address of the Owner, where	SO DOL VACOOM TROCK (CEMENT)	2	BL VACUUM TRUCK (CEM 0	\$90.00 \$0.00	5. 4 No
Name and Address of the Owner, where	SO DOL VACOOM TROOK (CEMENT)		BL VACUUM TRUCK (CEM	\$90.00 \$0.00 \$0.00	\$
0			BL VACUUM TRUCK (CEM 0 0	\$90.00 \$0.00 \$0.00	\$ 180.00
0 040000 C	ement Floating Equipment (TAXABLE)		BL VACUUM TRUCK (CEM 0 0	\$90.00 \$0.00 \$0.00 Transports Total	\$ \$ 180.00
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I ACKNOWLEDGE THAT THE PAYMENT TERMS, LINLESS SPECIFICALLY AMENDED IN WRITING ON THE FRONT OF THE FORM OR INJURIE 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.