



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1263488
OIL & GAS CONSERVATION DIVISION

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 # _____

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1263488

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift 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 <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Paul Bowman Oil Trust
Well Name	PEKAREK 1
Doc ID	1263488

All Electric Logs Run

Dual Induction Log
Dual Compensated Porosity Log
Borehole Compensated Sonic Log
Sonic Cement Bond Log

ALLIED CEMENTING CO., INC.

Federal Tax I.D.# 48-0727860

originals in file

15578

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: R

DATE <u>1-30-04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Pekarek</u>	WELL # <u>1</u>	LOCATION <u>Zurich 25 1/2 W 25</u>			COUNTY <u>Rock</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Marion Doherty Rig E

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 210

CASING SIZE 8 5/8 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 14 1/2

PERFS.

DISPLACEMENT 12 1/2 RBL 2816

OWNER

CEMENT

AMOUNT ORDERED 160 com 3% cc
2% gel

EQUIPMENT

345 PUMP TRUCK CEMENTER Doug Stone

HELPER

LK TRUCK DRIVER

DRIVER Craig

BULK TRUCK DRIVER

213 DRIVER

COMMON @

POZMIX @

GEL @

CHLORIDE @

HANDLING @

MILEAGE

TOTAL

REMARKS:

Paul Bowman

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

PLUG 1 wooden @

TOTAL

CHARGE TO: Paul Bowman

STREET

CITY STATE ZIP

FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment
and furnish cementer and helper to assist owner or

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

DATE <u>2-5-04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>PEKAREK</u>	WELL # <u>1</u>	LOCATION <u>ZURTH 1W 2S 12W SW 1</u>			COUNTY <u>COOKS</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR MURTON B

TYPE OF JOB PRODUCTION STRING

HOLE SIZE 7 7/8 T.D. 3819

CASING SIZE 5 1/2 DEPTH 3818

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 11'

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 92 3/4 BBL

OWNER _____

CEMENT AMOUNT ORDERED 150 ASC 2% GEL

EQUIPMENT

PUMP TRUCK CEMENTER MARK

345 HELPER DAVE

BULK TRUCK DRIVER CARY

282

BULK TRUCK DRIVER _____

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

REMARKS:

Port COLLAR on JT # 75 (1636)

10SK CMH

15SK CRH

FLOAT Held

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG 5 1/2 TRP @ _____

2 STATING HEAD @ _____

_____ @ _____

TOTAL _____

CHARGE TO: PAUL BOWMAN OIL

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

5 1/2 _____ @ _____

CUTAS SICE _____ @ _____

INSECT _____ @ _____

5 GENT _____ @ _____

2 BASKETS _____ @ _____

PORT COLLAR _____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was

MICHAEL A. DAVIGNON
PETROLEUM GEOLOGIST

P.O. DRAWER 150
BOGUE, KANSAS 67625

PHONE: 785-421-2346 OFFICE
785-421-7520 CELL

GEOLOGIST'S REPORT DRILLING TIME AND SAMPLE LOG

Company	Paul Bowman Oil Company		
Lease	Pekarek #1		
Field	Lynd South		
Location	NE-SW-NE	1900' FNL	1775' FEL
Section	8	Township	10s
		Range	19w
County	Rooks	State	Kansas
Contractor	Murfin Drilling Company, Rig #8		
Spud Date	01-30-2004	Completion Date	2-4-04
RTD	3819	LTD	3821
Mud up	3400'	Type Mud	Drispac
Samples saved from	3300'	To	T.D.
Drilling time kept from	3200'	To	T.D.
Samples examined from	3200'	To	T.D.
Geological supervision from	Surface	To	T.D.

Geologist on well: *Michael Davignon*

Formation Tops (Log)	Elevations
Anhydrite	1622 (+597)
Topeka	3208 (-989)
Heebner	3412 (-1193)
Lansing	3456 (-1231)
B-KC	3652 (-1433)
Arbuckle	3758 (-1539)
T.D.	3821 (-1602)
	KB 2219'
	DF
	GL 2214'

Measurements Are All From: KB

Electrical Surveys
R/A Guard w/sonic
By Log-Tech

Casing
Surface 202' of 8 5/8"
Production 3814' of 5 1/2"

LEGEND

3200

-987

9:00 AM 2-2-04

50

3300

START 10' WET DRY

50

LS, GRAY, F-XLN.
SL DY -NSO-

SH, GRAY, RUST
SH, LT GRAY, MAROON

BLACK CARB SHALES

SH, LT GRAY
LS, LT GRAY, TN, F-XLN
NO DIS P, DY
-NSO-

SH, GRAY, BLK

SH, LT GRAY, RUST

LS, TN, CEM, F-XLN
SL FOSS, SM FR INT PT P,
SCTD STN, SL S. FIO.
NO BDRK

SH, LT GRAY, GEN

SH, GRAY, TN

LS, CEM, TN, F-XLN
DNS, NO DIS P
-NSO-

3400

HEEBNER
3412 (1193)

BLACK CARB SHALE
sh, blk,
L4, TN, F-XLN
-NSO

Sh, GRAY, RUST

Sh, RUST, GRN

L3, CRM, TN, F-XLN
SL FOSS, V PR VIS P,
FR ABUNDANT OIL STN, NO ODR
SL S.F.O.

Sh, RUST, GRAY

Sh, GRAY, BLK

LANSING
3448 (1229)

L3, CRM, TN, F-XLN
OCCAS POC W/ VUG P, SL 2Y
PR VIS P, SCLD STN
NO ODR

L3, CRM, TN, F-XLN
V 2Y, TRIP,
-NSO-

BLACK CARB SHALE

Sh, Lt GRAY, BLK, RUST

L3, CRM, TN, F-XLN
SL 2Y, SL CFY,
NO VIS P, NO ODR
NO S.O.

A. A. CRM F-XLN
2Y -NSO-

Sh, Lt GRAY, RUST
Sh, GRAY, BLK

L3, CRM, TN, F-XLN
SL FOSS, V PR VIS P,
SL 2Y, V SCLD STN
NO S.F.O.

Sh, Lt GRAY, Lt GRN

Sh, Lt GRN, BLN

L3, CRM, TN, F-XLN
FOSS, SL 2Y, SM FR POC P,
SM FR INTXN P, FR EVN DAK STN
SL S.F.O. NO ODR

Sh, RUST, GRAY

L3, WHIT, CRM F-XLN
SL FOSS, OCCAS POC W/ FR INTXN P,
SL EVN DAK BAY STN,
NO S.F.O. INT ODR

A. A. WHIT, OCCAS
F-XLN, 2Y
-NSO-

L3, WHIT, TN, F-XLN
V DNS, 2Y, NO VIS P,
-NSO-

BLACK CARB SHALE

Sh, GRAY, GRN

Sh, RUST, GRN

L3, CRM, TN, F-XLN
SL OOL, FR INTXN P,
SM VUG P, FR EVN STN
SCLD S.F.O. FR ODR

Sh, Lt GRAY
BLACK CARB SHALE

L3, TN, BLK, F-XLN, SL FOSS,
FR INTXN P, SCLD STN
V SCLD S.F.O.

Sh, RUST, Lt GRN
Sh, Lt GRAY, BLN

L3, WHIT, BLK, F-XLN
SL OOL, FR POC W/ GP OOL P,
SM FR INTXN P, FR EVN STN,
GP S.F.O. FR ODR

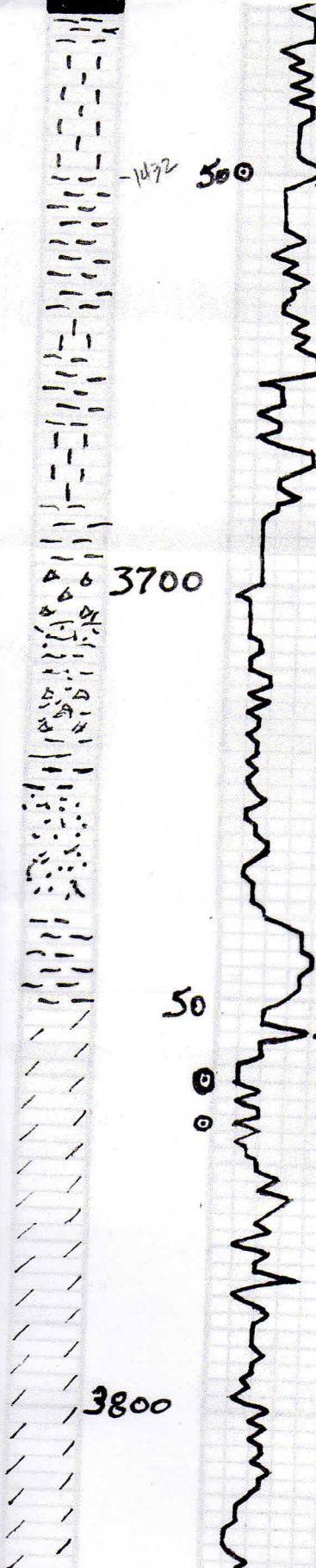
BLACK CARB SHALE

50

3500

50

3600



B-KC 3651
(-1432)

ARBUCKLE
3754 (-1535)

R.T.D. 3809

Sh, GRAY, BRN
 Sh, RUST, GRN
 Sh, BRN, RUST
 Ls, WHT, CRAM, f-XEN,
 NO VIS S, -NSO-
 Sh, GRAY, RUST
 Sh, RUST, BLE, GRN
 Sh, RUST, GRN
 Sh, RUST, GRN
 Ls, TN, CRAM, f-XEN,
 NO VIS S, -NSO-
 Sh, RUST, GRN
 Ls, WHT f-XEN,
 V.D.P., YEL, TRIP,
 -NSO-
 A.A. S.S., FASH,
 -NSO-
 Ls, FR, v P-XEN, v D,
 NO VIS S, -NSO-
 Sh, RUST, BRN
 S.S. CLT, W/ BRN, f. BRN,
 gd DIS S, gd E.F.O.
 NO ODOE,
 Sh, BRN, MEN, SANDY
 Sh, BRN, RUST, SANDY
 Sh, BLUE, GRN
 Sh, GRN, WXY
 Dolo, Lt GRAY, TN, f-XEN,
 sm gd INTXEN, fr VUGS,
 SAT, gd S.F.O. gd ODOE
 Dolo, Lt GRAY, TN, f-XEN, sm fr INTXEN,
 sm BRN VUG S, gd LUM DRK STN,
 ABUND NUY OIL, sm INT, gd ODOE
 Dolo, Lt GRAY, TN, f-XEN,
 pr VUGS, sm fr INTXEN,
 ABUND DRK NUY OIL STN, sm INT,
 fr S.F.O. gd ODOE
 Sh, RUST, GRN
 Sh, GRN, BLUE
 Dolo, TN, Lt GRAY, pink, f-XEN
 DNS, NO VIS S, sm NUY OIL,
 NO F.O. NO ODOE
 A.A. sm C-XEN
 BRN, sm NUY RESIN STN
 NO ODOE
 Dolo, TN, GRAY, f-XEN, DNS
 NO VIS S, NO S.F.O.
 NO ODOE
 Dolo, Lt, GRAY, M-XEN,
 fr VIS INTXEN S,
 BRN
 -NSO-

DST #1 3747 TO 3765
 RECD 180' MUDDY OIL 1970 at 30-30-70-3
 120' MUDDY OIL 15% MUD
 IFO 86-131 32 SEP 1119
 FFP 126-161 FSEP 1097

7:00am Z-4-04



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Paul Bowman Oil

Pekarek #1

paul

8-10s-19w-Rooks

Job Ticket: 18367

DST#: 1

ATTN: Mike Davignon

Test Start: 2004.02.03 @ 18:54:38

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 20:46:38

Time Test Ended: 01:24:38

Test Type: Conventional Bottom Hole

Tester: Jason McLemore

Unit No: 24

Interval: 3747.00 ft (KB) To 3765.00 ft (KB) (TVD)

Total Depth: 3765.00 ft (KB) (TVD)

Hole Diameter: 6.80 inches Hole Condition: Good

Reference Elevations: 2226.00 ft (KB)

2220.00 ft (CF)

KB to GR/CF: 6.00 ft

Serial #: 6627

Inside

Press@RunDepth: 161.58 psig @ 3749.00 ft (KB)

Start Date: 2004.02.03

End Date:

2004.02.04

Capacity: 7000.00 psig

Last Calib.: 1899.12.30

Start Time: 18:54:38

End Time:

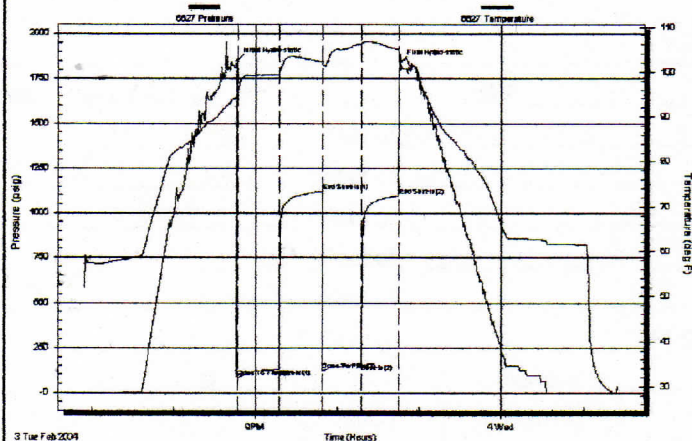
01:24:38

Time On Btm: 2004.02.03 @ 20:46:08

Time Off Btm: 2004.02.03 @ 22:45:23

TEST COMMENT: IFF-Good Blow, Built to 8", No Blow back
 FFP- Fair Blow, Built to 5", Surface Blow back

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1849.90	94.77	Initial Hydro-static
1	86.64	94.69	Open To Flow (1)
31	131.20	99.47	Shut-In(1)
63	1119.90	102.18	End Shut-In(1)
63	126.68	101.62	Open To Flow (2)
92	161.58	106.07	Shut-In(2)
119	1097.70	104.90	End Shut-In(2)
120	1838.46	103.18	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
180.00	Oily Mud 20% Oil	0.89
120.00	Muddy Oil 10-15% Mud	1.64

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)