

1271902

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
TCores aken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Geologist Report / Mud Logs	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
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>			PRODUCTION INTERVAL: Top _____ Bottom _____	

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:
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Miami County, KS
Well: John Flake I-1
Lease Owner: Triple T

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
10/30/2015

WELL LOG

Thickness of Strata	Formation	Total Depth
0-14	Soil-Clay	14
28	Shale	42
8	Lime	50
12	Shale	62
31	Lime	93
9	Shale	102
20	Lime	122
3	Shale	125
3	Lime	128
4	Shale	132
6	Lime	138
22	Shale	160
5	Sandy Shale	165
10	Sand	175
45	Sandy Shale	220
80	Shale	300
9	Sand	309
41	Shale	350
5	Lime	355
5	Shale	360
3	Lime	363
12	Shale	375
6	Lime	381
6	Sandy Shale	387
10	Shale	397
4	Lime	401
13	Shale	414
20	Lime	434
10	Shale	444
3	Lime	447
13	Shale	460
3	Lime	463
15	Shale	478
8	Sandy Shale	486
16	Shale	502
1	Lime	503
6	Shale	509
1	Sandy Shale	510
7	Sand	517
11	Sandy Shale	528

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals $D^2 \times .14 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

* D - Diameter of Pump Sheave

* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

BELT LENGTH - $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS: $\frac{WATTS}{VOLTS} = AMPS$

746 WATTS equal 1 HP

Log Book

Well No. I-1

Farm John Flake

KS
(State)

Miami
(County)

8
(Section)

18
(Township)

24
(Range)

For Triple T Oil
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East
Louisburg, KS 66053
913-710-5400

Thickness of Strata	Formation	Total Depth	Remarks
0-14	soil - clay	14	
28	shale	42	
8	lime	50	
12	shale	62	
31	lime	93	
9	shale	102	
20	lime	122	
3	shale	125	
3	lime	128	
4	shale	132	
6	lime	138	Heitha
22	shale	160	
5	sandy shale	165	
10	sand	175	slight show - broken oil
45	sandy shale	220	
80	shale	300	
9	sand	309	shale seams - no oil
41	shale	350	
5	lime	355	
5	shale	360	
3	lime	363	
12	shale	375	
6	lime	381	
6	sandy shale	387	
10	shale	397	
4	lime	401	
13	shale	414	



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

4720
4634
Invoice #806318

TICKET NUMBER 49893
LOCATION Ottawa KS
FOREMAN Fred Madu

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-4-15	7966	John Flake # I1	SE 8	1E	24	MI
CUSTOMER <u>Triple T Oil</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>P.O. Box 339</u>			<u>712</u>	<u>Fred Madu</u>		
CITY <u>Louisburg</u>	STATE <u>KS</u>	ZIP CODE <u>66053</u>	<u>495</u>	<u>Har Bec</u>		
			<u>675</u>	<u>Kai Det</u>		
			<u>548</u>			

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 580 CASING SIZE & WEIGHT 2 7/8 EUE
CASING DEPTH 570 DRILL PIPE Baffle TUBING @ 5.37-50 OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING _____
DISPLACEMENT 3-14 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 40 PM

REMARKS: Hold Safety meeting. Establish circulation. Mix + Pump 100#
Gel Flush. Mix + Pump 78 SKS Poz Blend IA Cement 2% Gel.
Cement to surface. Flush pump + lines clean. Displace 2 1/2"
Rubber plug to Baffle in casing. Pressure to 800# PSI.
Monitor Pressure For 30 Minute MIT. Release pressure
to set float valve. Shut in casing

TOS Drilling. (wes)

Fred Madu

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
<u>CE0450</u>	<u>1</u>	<u>PUMP CHARGE</u>	<u>495</u>	<u>1500.00</u>
<u>CE0002</u>	<u>---</u>	<u>MILEAGE</u>	<u>N/C</u>	<u>---</u>
<u>CE0711</u>	<u>1/3 Minimum</u>	<u>Tax Miles Delivery</u>	<u>548</u>	<u>220.00</u>
<u>WE0853</u>	<u>1 hr</u>	<u>80 BBL Vae Truck</u>	<u>675</u>	<u>100.00</u>
		<u>Sub Total</u>	<u>1520.00</u>	
		<u>Less 46%</u>	<u>-837.20</u>	<u>982.80</u>
SCANNED				
<u>CC5840</u>	<u>78 SKS</u>	<u>Poz Blend IA Cement</u>	<u>1053.00</u>	<u>---</u>
<u>CC5765</u>	<u>231#</u>	<u>Bentonite Gel</u>	<u>69.30</u>	<u>---</u>
<u>CP8176</u>	<u>1</u>	<u>2 1/2" Rubber Plug</u>	<u>45.00</u>	<u>---</u>
		<u>Sub Total</u>	<u>1167.30</u>	
		<u>Less 46%</u>	<u>-536.25</u>	<u>630.34</u>
		<u>870</u>	<u>SALES TAX</u>	<u>50.93</u>
			<u>ESTIMATED TOTAL</u>	<u>1663.57</u>

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE 3080.68

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