

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1353277
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 |
|-----------------------------------|-----------------|---|

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: _____

1353277

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 |
|--|---|

| 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: <input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------|-------|---------|------------|---|

| | |
|---|--|
| Date of First, Resumed Production, SWD or ENHR. | 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> <input type="checkbox"/> Other <i>(Specify)</i> _____ | PRODUCTION INTERVAL: _____ _____ |
|--|---|---|

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 10827
 LOCATION Eureka
 FOREMAN Steve Mead

TREATMENT REPORT & FIELD TICKET
 CEMENT

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY | |
|---------------------------------|------------|--------------------|----------------------|----------|--------|---------|--------|
| 10-7-06 | 8136 | R. Chaffee #1 | 15 | 9S | 4E | Clay | |
| CUSTOMER TE-PE Oil & Gas | | | Three River Drilling | | | | |
| MAILING ADDRESS P.O. Box 522 | | | | | | | |
| CITY Canton | | STATE KS | ZIP CODE 67428 | TRUCK # | DRIVER | TRUCK # | DRIVER |
| | | | | 463 | Alan | | |
| | | | | 442 | Jeff | | |

JOB TYPE Surface HOLE SIZE _____ HOLE DEPTH 210' CASING SIZE & WEIGHT 8 5/8" 28"
 CASING DEPTH 200' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 15'
 DISPLACEMENT 11 1/4 bbl/s DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: SAFETY Meeting: Rig up to 8 5/8 casing. Pump 5 bbls Fresh water + 3 bbls Dye water. Mix 210 sks Regular class A cement w/ 3% CaCl2 2% Gel & 1/2" Floccs. Displace with 11 1/4 bbls Fresh water. Shut well in. Good cement. Return to surface. Shutdown cement fell back 10-15' Feet down. Wait 30 min Tap off well. Job complete Rig down.

Thank you

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|-----------------|---------|
| 54013 | 1 | PUMP CHARGE | 620.00 | 620.00 |
| 5406 | 90 | MILEAGE | 3.15 | 283.50 |
| 11045 | 210 sks | Class A cement | 11.25 | 2362.50 |
| 1102 | 592# | CaCl2 3% | .64 | 378.88 |
| 1118A | 394# | Gel 2% | .14 | 55.16 |
| 1107 | 105# | Floccs 1/2" | 1.80 | 189.00 |
| 5407A | 9.87 tons | Ton Mileage Bulk Truck | 1.05 | 932.72 |
| 4106 | 1 | 8 5/8 Cement Basket | 280.00 | 280.00 |
| | | | Sub Total | 5101.76 |
| | | | SALES TAX | 605.74 |
| | | | ESTIMATED TOTAL | 5301.50 |

AUTHORIZATION By Barber TITLE Operator DATE 2009608

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 10860
 LOCATION EUREKA
 FOREMAN RICK LEFORD

TREATMENT REPORT & FIELD TICKET
 CEMENT

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|---------------------------------|-------------|--------------------|-----------------------------|---------------------------------|--|--------|
| 10-12-06 | 8136 | Chaffee #1 | | | | CLAY |
| CUSTOMER Te-Pe Oil & Gas | | | three rivers explor. | | | |
| MAILING ADDRESS P.O. Box 520 | | | | | | |
| CITY CANTON | STATE KS | ZIP CODE 67428 | | | | |
| TRUCK # | | | | | | |
| | | | 463 | Alan | | |
| | | | 502 | Jarrid | | |
| | | | | | | |
| | | | | | | |
| JOB TYPE <u>longstring</u> | | | HOLE SIZE <u>7 7/8"</u> | HOLE DEPTH <u>2050'</u> | CASING SIZE & WEIGHT <u>4 1/2" 10.5#</u> | |
| CASING DEPTH <u>2029 ASTO</u> | | | DRILL PIPE | TUBING | OTHER | |
| SLURRY WEIGHT <u>14.2#</u> | | | SLURRY VOL <u>35 bbl</u> | WATER gal/sk <u>5.6</u> | CEMENT LEFT in CASING <u>15'</u> | |
| DISPLACEMENT <u>32 1/4 bbl</u> | | | DISPLACEMENT PSI <u>500</u> | Surp PSI <u>1000</u> | RATE | |

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Break circulation w/ 15 bbl fresh water. Mixed 150 sks 60/40 Pozmix cement w/ 2% gel, 5# Kol-seal #2/sk, 10% salt @ 14.2# #2/sk, yield 1.32. Wash out pump & lines. shut down, release plug. Displace w/ 32 1/4 bbl fresh water. Final pump pressure 500 PSI. Bump plug to 1000 PSI. wait 2 minutes. release pressure, flat held. Good circulation at all times while cementing. Job complete. Rig down.

"Thank You"

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--|-------------------|------------------------------------|-----------------|---------|
| 5401 | 1 | PUMP CHARGE | 800.00 | 800.00 |
| 5406 | 90 | MILEAGE | 3.15 | 283.50 |
| 1131 | 150 sks | 60/40 Pozmix cement | 9.35 | 1402.50 |
| 1118A | 260# | Gel 2% 290 | .14 | 36.40 |
| 1110A | 750# | Kol-seal 5# #2/sk | .36 | 270.00 |
| 1111 | 750# | Salt 10% | .29 | 217.50 |
| 5407A | 6.45 | Ton-mileage BULK TAX | 1.05 | 609.53 |
| 4404 | 1 | 4 1/2" top rubber plug | 40.00 | 40.00 |
| <u>Had Rotating head but it Locked up Right away</u> | | | | |
| | | | subtotal | 3659.43 |
| | | | SALES TAX | 123.88 |
| | | | ESTIMATED TOTAL | 3783.31 |

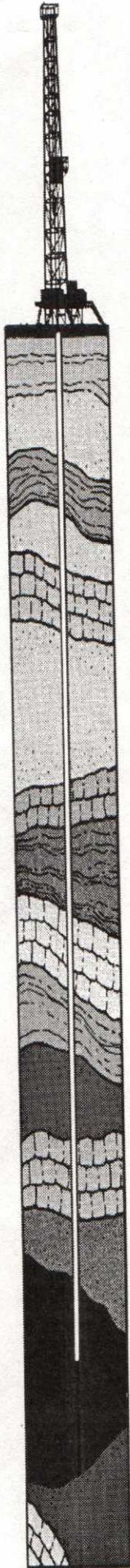
209186

AUTHORIZATION witnessed by Terry Dandy

TITLE owner

DATE _____

Thomas E. Blair
 P.O. Box 280
 Douglass, KS 67039
 316-747-2390
 316-655-8585
tkbblair@sbcglobal.net



GEOLOGIST'S REPORT

WELL: R. Chaffee #1
 OPERATOR: Te-Pe Oil & Gas
 LOCATION: NE NE NW 15-09-04E, Clay County, KS
 API#: 15-027-20039
 ELEVATION: 1305 GL
 MEASUREMENTS FROM: 1305
 CONTRACTOR: Three Rivers Exploration LLC
 WELLSITE GEOLOGIST: Tom Blair
 TOTAL DEPTH: 2050 feet

FORMATION TOPS:

| FORMATION | SAMPLE DEPTH | LOG DEPTH |
|-----------------------|--------------|-------------|
| Lansing | 1431 (-126) | 1431 (-126) |
| Mississippi Chert | 1948 (-643) | 1950 (-645) |
| Mississippi Limestone | 1974 (-669) | 1976 (-671) |
| Kinderhook | 2016 (-711) | 2018 (-713) |
| Total Depth | 2050 (-745) | 2053 (-748) |

ZONES OF INTEREST AND HYDROCARBON SHOWS

FORMATION: Mississippi Chert
 INTERVAL: 1948-1974 (sample depth)
 DESCRIPTION: Chert, white to gray, trace blue, tripolitic, good weathered porosity, good show of free oil and gas bubbles, good staining. Some sharp, fresh chert with no porosity or shows.

FORMATION: Mississippi Dolomite
 INTERVAL: 1980-1984 (sample depth)
 DESCRIPTION: Dolomite, fine sucrosic, good sucrosic crystalline porosity, good show of free oil when crushed, overall mineral fluorescence.

