KOLAR Document ID: 1837108

Confident	tiality Re	equested:
Yes	No	

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION Form ACO-1 January 2018 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.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / 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.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR □ OG □ GSW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to EOR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Liner Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
Dual Completion Permit #: SWD Permit #:	Leastion of fluid diamonal if hould affaite
□ 5000 Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec 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 Drill Stem Tests Received						
Geologist Report / Mud Logs Received						
UIC Distribution						
ALT I II III Approved by: Date:						

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Operator Name:	Lease Name:	Well #:
Sec TwpS. R East 🗌 West	County:	

Page Two

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 (Attach Additional Sh	eets)	Y	es 🗌 No			og Formatio	n (Top), Depth	and Datum	Sample
Samples Sent to Geolog	*		és 🗌 No	Ν	lame	e		Тор	Datum
Cores Taken Electric Log Run Geologist Report / Mud List All E. Logs Run:			ies No ies No ies No						
		Repo	CASING I] Ne	w Used rmediate, productio	on, etc.		
Purpose of String	Size Hole Drilled		ze Casing tt (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING /	SQU	EEZE RECORD			
Purpose: Depth Perforate		Туре	Type of Cement # Sacks		k	Type and Percent Additives			
Protect Casing Plug Back TD Plug Off Zone									
 Did you perform a hydra Does the volume of the is Was the hydraulic fractu Date of first Production/Inj 	total base fluid of the h ring treatment informa	nydraulic fra tion submit	acturing treatment	al disclosure regis	-	Yes Yes Yes Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three	
Injection:			Flowing	Pumping		Gas Lift 🗌 O	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er Bb	ls.	Gas-Oil Ratio	Gravity
DISPOSITION	I OF GAS:		M	ETHOD OF COM	IPLE	TION:			ON INTERVAL:
Vented Sold (If vented, Subm	Used on Lease		Open Hole		-		mingled	Тор	Bottom
	oration Perfora Top Botto		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeeze	
TUBING RECORD:	Size:	Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Owens Oil Company, LLC
Well Name	TEBBENS HEMI 1 SWD
Doc ID	1837108

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set		Setting Depth	Type Of Cement		Type and Percent Additives
Surface	11	8.625	20	40	Portland	8	na
Production	6.75	4.5	10.5	1295	Thick Set	135	na



NASD Symbol HMGP

WWW.HEMIENERGY.COM

Tebben Hemi #1 SWD, Tebben Lease, Woodson County, KS

Contractor: Operator #:	McPherson Drillin 5675	ng, Cherryvale, KS
Well Name:	Hemi #2	Hemi On Site Representative:Craig Treiber
Spud Date: TD:	7/1707 7/19/07	
Surface Casin	ng: 40' 8 5/8"	x 20 lb/ft, 8 sx Portland Cement

Driller's Log Excerpted from McPherson Drilling Records:

Formation	Тор	Base	Formation	Тор	Base
Soil/clay	0	17	Sand	1055	1120 Heavy Water Flow
Gravel	17	20	MS Lime	1120	1252
Shale	20	77 ·	Break	1252	1277
Lime	77	90	Lime	1277	1305 TD
Shale	90	94			
Lime	94	181	*** = Squirrel Sand	stone: g	ood show, good odor
Shale	181	193	-	-	
Lime	193	379			<u>.</u>
Shale	379	652			
Lime	652	680			
Shale	680	712			· -
Lime	712	728			
Shale	728	772			
Oil Sand ***	772	784			
Sandy Shale	784	837			
Coal	837	838			
Shale	838	893			
Sandy Shale	893	1033			RECEIVED
Sand, Wet	1033	1055			RECEIVED KANSAS CORPORATION COMMISSION
-					

JUL 2 8 2008

CONSERVATION DIVISION WICHITA, KS

131 East Exchange Avenue, Suite 223 Ft. Worth, TX 76106 817-566-0351 Fax 817-566-0354 1

CONSOLIDATED OIL WELL SERVICES, INC. P.Q. BOX'884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER

LOCATION EUREKA FOREMAN KEVIN MCCOY

12103

TEBBENS D **TREATMENT REPORT & FIELD TICKET**

CEMENT

DATE	CUSTOMER #	· WELL	NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
7-19-07	3610	TEBBENS	Hemi *	11	29	255	17E	Woodson
CUSTOMER								
	ENERge				TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE			•	645	445	Justin	· · · ·	- <u> </u>
P.O. Box	123 1100 Z	NDIANA ST.	STE 116	Jones	439	Jerrid		
CITY	<u></u>	STATE	ZIP CODE	Rigit	436	SHANNON		
GRAHAM		Tx	76450		452 763	Russ		
JOB TYPE		HOLE SIZE 6	3/4	HOLE DEPT	H. 1307	CASING SIZE &	WEIGHT 4/1/2_	9.5 4 New
CASING DEPTH	/	DRILL PIPE				<u></u> .	_ OTHER	<u> </u>
SLURRY WEIGH		SLURRY VOL		WATER gal/s	sk <mark>a o</mark>	CEMENT LEFT in	CASING_0	
DISPLACEMEN'				MIX PSI	<u> </u>	RATE		
REMARKS:	Fety Meet	No: Rige	up to 4	1/2 CASIN	19. BREAK	CIRCULATI	on w/ 30	O BBC
Fresh w	Ater. PUR	no 6 sks	Gel FR	1sh, 10	BLL WATCE	Spacee 1.	<u> 3 BBL D</u>	<u>re wake.</u>
Mixed	125 545 7	HICK Set	Cement.	w18*1	KOL-SEAL 1	Per/SK @ 1	3.4 # per	IgAL
Viold 1	72 MACK	out Pum	O & LIN	es. Sha	It down .	Release Pl	ug. DISP	IACE WI
21.2 Rh	1 Fresh u	inter. fin	VAL PUR	MDING P	Ressure 6	100 PSI. Be	imp Plug	to 1100
PSI. LAIA	art 2 mi	vates. Re	lease PR	ressure.	FIDAT He.	1d. 600d	Cement K	Petuens
to SUR	FACE = 8	BLC STUR	RU to 1	Pit. Jol	· Complete	. Rig dow	w	

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		TOTAL
5401	1	PUMP CHARGE	840.00	840.00
5406	40	MILEAGE	3.30	132.00
1126 A	135 SKS	THICK SET CEMENT	15.40	2079.00
1110 A	1080 *	KOL-SEAL 8 * Per /SK	. 38 *	410.40
1118 A	300 *	Gel flush	.15 *	45.00
5407 A 1	7.42 Tons	40 miles BULK TRUCK RECEIVED KANSAS CORPORATION COMMI	sioy, 10	326.48
5502 C	3. HRS	80 BBL VAC IRYCK	10.00	270.00
5501 C	3 HRS	WATER TRANSPORT JUL 20 2000	100,00	300.00
1123	6500 9Als	City water Conservation DIVISIO WICHITA, KS	N 2.80/1000	83.20
4404	1	41/2 Top Rubber Plug	40.00	40.00
		PAID IN Full 7-19.07 CK		
		w/ 5% Discount = 4,458.84	Sub TotAL	4526.08
	· · · · ·	D THANK YOU 6.3%	SALES TAX	167.43
ł-	, qf		ESTIMATED TOTAL	4/693.51
	has h.	TITIF	DATE	

AUTHORIZATION

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