

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3830
Name: AX&P, Inc.
Address: P.O. Box 1176
Independence, KS 67301
City/State/Zip: Pacer
Purchaser: _____
Operator Contact Person: J.J. Hanke
Phone: (620) 325-5212
Contractor: Name: Patrick Tubbs
License: 33079
Wellsite Geologist: J J Hanke
Designate Type of Completion:
☒ New Well ☐ Re-Entry ☐ Workover
☒ Oil ☐ SWD ☐ SIOW ☐ Temp. Abd.
☐ Gas ☐ ENHR ☐ SIGW
☐ Dry ☐ Other (Core, WSW, Expl., Cathodic, 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./SWD
☐ Plug Back ☐ Plug Back Total Depth
☐ Commingled ☐ Docket No. _____
☐ Dual Completion ☐ Docket No. _____
☐ Other (SWD or Enhr.?) ☐ Docket No. _____
2/3/09 2/26/09 6/10/09
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 205-27758-00-00
County: Wilson
NW SW SE Sec. 28 Twp. 30 S. R. 16 ☒ East ☐ West
700 feet from (S) N (circle one) Line of Section
2000 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name Unit 1- WOLFE Well #: WN#9
Field Name: Neodesha
Producing Formation: Neodesha Sand
Elevation: Ground: 785' Kelly Bushing: _____
Total Depth: 840 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 40 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☐ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 838'
feet depth to surface w/ 100 sx cmt.
Alt 2-Dlg - 8/6/09

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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: [Signature]
Title: Pres. Date: 7/10/09
Subscribed and sworn to before me this 10th day of July, 2009.
Notary Public: Becky R. Hambleton
Date Commission Expires: _____

BECKY R. HAMBLETON
Notary Public - State of Kansas
My Appt. Expires 8/27/09

KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes ☐ Date: _____
✓ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution

Operator Name: AX&P, Inc. Lease Name: Unit 1 Wolfe-N Well #: WN # 9
 Sec. 28 Twp. 30S. R. 16 ☒ East ☐ West County: Wilson

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width: 100%;"> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> <tr> <td>Oswego</td> <td>563</td> <td></td> </tr> <tr> <td>Sand</td> <td>760'</td> <td></td> </tr> </table>	Name	Top	Datum	Oswego	563		Sand	760'	
Name	Top	Datum								
Oswego	563									
Sand	760'									

Gamma Ray - Neutron

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
Surface	11"	6 5/8"		40	Portl.	8	none
Production	5 1/8"	2 7/8"	6.5	838'	Portl	100	2% Gel/ 1% Cal

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				
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED JUL 31 2009 </div>				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
1	Neodesha Sand	Acid / gel frac	764-74'

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
			none		
Date of First, Resumed Production, SWD or Enthr.			Producing Method		
6/12/09			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	3.5	min	20		

Disposition of Gas ☐ Vented ☐ Sold ☐ Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____

Production Interval



TICKET NUMBER 20858

LOCATION Eureka

FOREMAN Steve Neal

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8876

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-26-09	1124	UNIT 1 W 9/4 North # 9				Wilson
CUSTOMER A X & P						
MAILING ADDRESS P.O. Box 1126						
CITY Independence	STATE KS	ZIP CODE 673501				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			485	Alan		
			515	Justin		

JOB TYPE <u>Long string</u>	HOLE SIZE <u>5 1/2</u>	HOLE DEPTH <u>840'</u>	CASING SIZE & WEIGHT
CASING DEPTH <u>838</u>	DRILL PIPE	TUBING <u>2 3/8</u>	OTHER
SLURRY WEIGHT <u>12.8</u>	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING
DISPLACEMENT <u>4.9 bbls</u>	DISPLACEMENT PSI <u>400*</u>	MIX PSI <u>Bump Plug 200*</u>	RATE
REMARKS: <u>Safety Meeting: Rig up to 2 3/8 Tubing. Break Circulation with Fresh</u> <u>Water. Mix 1sk Gal. Fluid 5bbl water spacer. Mix 5sk Class A Cement</u> <u>with 2% Gal. 1% Cast. At 12.8". Shut down. Wash out Pump & Lines. Stuff</u> <u>2 plugs. Displace with 4.9 bbls Fresh water AT 4 bbl per min. Final Pumping</u> <u>Pressure 400* Bump Plug to 200*. Close well in 200*. Good Cement</u> <u>to surface. Job Complete Rig down</u>			
			RECEIVED

~~RECEIVED~~

III 31 2009

Thank You

~~KCC WICHITA~~

[illegible]

Buyin \$757

AUTHORIZATION *Witness by JJ*

TITLE Owner

DATE _____