

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 6142
Name: Town Oil Company, Inc.
Address: 16205 West 287th St.
City/State/Zip: Paola, Kansas 66071
Purchaser: CMT
Operator Contact Person: Lester Town
Phone: (913) 294-2125
Contractor: Name: Town Oil Company, Inc.
License: 6142
Wellsite Geologist: _____
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. _____
5-22-09 5-27-09 7-23-09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

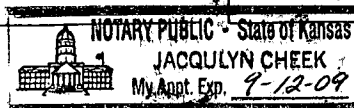
API No. 15 - 045-21535-00-00
County: Douglas
SE-SW-SW-NW Sec. 1 Twp. 15 S. R. 20 East West
2805 feet from S / N (circle one) Line of Section
4890 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: JOHNSON Well #: 1-09
Field Name: Baldwin
Producing Formation: Squirrel
Elevation: Ground: 1029 est. Kelly Bushing: _____
Total Depth: 860' 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 40
feet depth to surface w/ 5 sx cmt.

Drilling Fluid Management Plan AH II NR 8-27-09
(Data must be collected from the Reserve Pit)
Chloride content 0 ppm Fluid volume 80 bbls
Dewatering method used Vac Truck
Location of fluid disposal if hauled offsite: _____
Operator Name: Town Oil Company, Inc.
Lease Name: Dorsey S-1 License No.: 6142
Quarter NE Sec. 10 Twp. 16 S. R. 21 East West
County: Franklin Docket No.: D-26,829

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: Roberta Town
Title: Agent Date: 8-24-09
Subscribed and sworn to before me this 24th day of August
20 09
Notary Public: Jacquelyn Cheek
Date Commission Expires: 9-12-2009



KCC Office Use ONLY

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

Operator Name: Town Oil Company, Inc. Lease Name: Johnson Well #: 1-09
 Sec. 1 Twp. 15 S. R. 20 East West County: Douglas

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 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: <p style="text-align: center;">Gamma Ray Neutron Completion Log</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <p style="text-align: center;">SEE ATTACHED COPY</p>
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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
Surface	9 5/8"	7"		40'	Portland	5 sx	
Completion	5 5/8"	2 7/8"		850'	Portland	125 sx	50/50 Poz Mix 2%Gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

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
3	807-817 (30 shots)		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
 (If vented, Submit ACO-18.) Other (Specify) _____

TOWN OIL COMPANY, INC.

"Drilling and Production"

16205 W 287th Street
Paola, Kansas 66071

Fax# 913-294-4823

PHONE: 913-557-5482
913-294-2125

WELL: Johnson 1-09

LEASE OWNER: Town Oil Co., Inc.

WELL LOG

Thickness of Strata	Formation	Total Depth
0-2	soil & clay	2
4	lime	4
8	shale	12
5	lime	17
136	shale	153
30	lime	183
7	shale & slate	190
8	lime	198
6	shale	204
28	lime	232
19	shale	251
18	lime	269
75	shale sandy	344
21	lime	365
19	shale	384
7	lime	391
22	shale	413
25	lime	438
12	shale	450
24	lime	474
2	slate	476
6	shale	482
22	lime	504
3	shale & slate	507
5	lime	512
3	slate & shale	515
5	lime	520
12	shale	520
114	sandy shale	532
11	sandy shale	646
11	shale	657
12	red bed	668
18	shale	680
5	lime	698
7	shale	703
23	lime	710
14	shale	733
4	lime	747
3	shale	751
		754

RECEIVED

AUG 26 2009

KCC WICHITA

TOWN OIL COMPANY, INC.

"Drilling and Production"

16205 W 287th Street
Paola, Kansas 66071

Fax# 913-294-4823

PHONE: 913-557-5482
913-294-2125

WELL: Johnson 1-09

LEASE OWNER: Town Oil Co. Inc.

WELL LOG
CON'T

Thickness of Strata	Formation	Total Depth
13	lime	767
19	shale	786
12	lime & shale	798
4	sandy shale	802
3	sandy shale	805
10	sand	815
2	sand	817
43	sandy shale	860 TD

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AUG 26 2009
KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice Date: 05/29/2009 Terms: 0/30,n/30 Invoice # 22976
Page 1

TOWN OIL COMPANY
16205 W. 287 STREET
PAOLA KS 66071
(785) 294-2125

JOHNSON 1-09
20065
NW 1-15-20 DG
05/27/2009

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	123.00	9.2500	1137.75
1118B	PREMIUM GEL / BENTONITE	310.00	.1600	49.60
4402	2 1/2" RUBBER PLUG	1.00	22.0000	22.00
Description		Hours	Unit Price	Total
368 CEMENT PUMP		1.00	870.00	870.00
368 EQUIPMENT MILEAGE (ONE WAY)		20.00	3.45	69.00
368 CASING FOOTAGE		850.00	.00	.00
548 MIN. BULK DELIVERY		1.00	296.00	296.00

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KCC WICHITA

Parts: 1209.35 Freight: .00 Tax: 76.19 AR Total: 2520.54
Labor: .00 Misc: .00 Change: .00
Sublt: .00 Supplies: .00

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808 ELDORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 GILLETTE, WY 307/686-4914 McALESTER, OK 918/426-7667 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 WORLAND, WY 307/347-4577

