

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL Form ACO-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5675  
Name: McPherson Drilling  
Address 1: P.O. Box 129  
Address 2: \_\_\_\_\_  
City: Sycamore State: KS Zip: 67363 + \_\_\_\_\_  
Contact Person: Ron McPherson  
Phone: ( 620 ) 336-2662  
CONTRACTOR: License # 5675  
Name: Company Tools  
Wellsite Geologist: \_\_\_\_\_  
Purchaser: \_\_\_\_\_

Designate Type of Completion:  
\_\_\_\_ New Well    \_\_\_\_ Re-Entry    \_\_\_\_ Workover  
 Oil    \_\_\_\_ SWD    \_\_\_\_ SIOW  
\_\_\_\_ Gas    \_\_\_\_ ENHR    \_\_\_\_ SIGW  
\_\_\_\_ CM (Coal Bed Methane)    \_\_\_\_ Temp. Abd.  
\_\_\_\_ 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.    \_\_\_\_ Conv. to SWD  
\_\_\_\_ Plug Back: \_\_\_\_\_ Plug Back Total Depth  
\_\_\_\_ Commingled    Docket No.: \_\_\_\_\_  
\_\_\_\_ Dual Completion    Docket No.: \_\_\_\_\_  
\_\_\_\_ Other (SWD or Enhr.?)    Docket No.: \_\_\_\_\_  
05/27/09    05/28/09    06/09/09  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 125-31873-0000  
Spot Description: \_\_\_\_\_  
SE SE NW SW Sec. 13 Twp. 31 S. R. 16  East  West  
1595 Feet from  North /  South Line of Section  
3990 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: MONTGOMERY  
Lease Name: McPherson Well #: 13  
Field Name: Neodesha  
Producing Formation: Bartlesville  
Elevation: Ground: 908 Kelly Bushing: \_\_\_\_\_  
Total Depth: 1016 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 21 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: surface  
feet depth to: 21' w/ 8 <sup>5X cmt</sup>

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.: \_\_\_\_\_

*A142-Dlg-10/13/09*

**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: Ron McPherson  
Title: Owner Date: 07/27/09  
Subscribed and sworn to before me this 27th day of July,  
2009.  
Notary Public: Nancy McPherson  
Date Commission Expires: January 15, 2012

NANCY McPHERSON  
Notary Public - State of Kansas  
COM. EXPIRES: 1/15/2012

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
\_\_\_\_ Geologist Report Received  
\_\_\_\_ UIC Distribution  
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Operator Name: McPherson Drilling Lease Name: McPherson Well #: 13  
 Sec. 13 Twp. 31 S. R. 16  East  West County: MONTGOMERY

**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 <i>(Attach Additional Sheets)</i>  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 <i>(Submit Copy)</i>  List All E. Logs Run: <b>CORNISH WIRELINE SERVICES, INC.</b> See attached log w/original correspondence	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum SEE ATTACHED COPY OF DRILLERS LOG WITH ORIGINAL CORRESPONDENCE
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CASING RECORD <input checked="" 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'	7"	20	21'	Portland	8	
Long String	5 3/4"	2 7/8"	6.9	1005	See attached	Consolidated	Invoice

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				

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
1	916'-931'	See Attached Consolidated Invoice	

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. 6/12/09	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. 5	Gas Mcf 3
	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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Rig Number: <i>3</i>	S. <i>13</i> T. <i>31</i> R. <i>16E</i>	
API No. <i>15-125-31873</i>	County <i>MG</i>	
Elev. <i>907ft</i>	Location: <i>SE SE NW SW</i>	

Gas Tests:
<i>442' 5 MCF</i>

Operator: <i>Don McPherson, OWA McPherson Drilling</i>	
Address: <i>P.O. Box 127</i> <i>Sycamore, KS 67363</i>	
Well No: <i>13</i>	Lease Name: <i>McPherson</i>
Footage Location: <i>1595</i> ft. from the (N) <input checked="" type="radio"/> (S) Line <i>3990</i> ft. from the <input checked="" type="radio"/> (E) (W) Line.	
Drilling Contractor: <b>McPherson Drilling LLC</b>	
Spud date: <i>5/27/09</i>	Geologist:
Date Completed: <i>5/29/09</i>	Total Depth: <i>1016'</i>

Casing Record			Rig Time:
	Surface	Production	
Size Hole:	<i>11"</i>	<i>5 3/4"</i>	
Size Casing:	<i>8 5/8"</i>		
Weight:	<i>20#</i>		
Setting Depth:	<i>21"</i>		
Type Cement:	<i>Port</i>		
Sacks:	<i>8</i>		

Well Log								
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.
<i>SOIL</i>	<i>0</i>	<i>3</i>	<i>lime</i>	<i>615</i>	<i>638</i>			
<i>sand</i>	<i>3</i>	<i>7</i>	<i>shale</i>	<i>638</i>	<i>642</i>			
<i>shale</i>	<i>7</i>	<i>16</i>	<i>coal</i>	<i>642</i>	<i>644</i>			
<i>sand (wt)</i>	<i>16</i>	<i>20</i>	<i>shale</i>	<i>644</i>	<i>692</i>			
<i>shale</i>	<i>20</i>	<i>47</i>	<i>osw lime</i>	<i>692</i>	<i>725</i>			
<i>coal</i>	<i>47</i>	<i>48</i>	<i>summit</i>	<i>725</i>	<i>736</i>			
<i>shale</i>	<i>48</i>	<i>101</i>	<i>lime</i>	<i>736</i>	<i>752</i>			
<i>lime</i>	<i>101</i>	<i>106</i>	<i>milky</i>	<i>752</i>	<i>760</i>			
<i>sandy shale</i>	<i>106</i>	<i>181</i>	<i>lime</i>	<i>760</i>	<i>767</i>			
<i>lime</i>	<i>181</i>	<i>235</i>	<i>sandy shale</i>	<i>767</i>	<i>886</i>			
<i>sandy shale</i>	<i>235</i>	<i>239</i>	<i>oil sand</i>	<i>886</i>	<i>908</i>			
<i>shale</i>	<i>239</i>	<i>267</i>	<i>shale</i>	<i>890</i>	<i>915</i>			
<i>coal</i>	<i>267</i>	<i>268</i>	<i>oil sand</i>	<i>915</i>	<i>930</i>			
<i>shale</i>	<i>268</i>	<i>292</i>	<i>shale</i>	<i>930</i>	<i>961</i>			
<i>lime</i>	<i>292</i>	<i>315</i>	<i>sandy sh (s)</i>	<i>961</i>	<i>978</i>			
<i>shale</i>	<i>315</i>	<i>330</i>	<i>shale</i>	<i>978</i>	<i>1016</i>			
<i>lime</i>	<i>330</i>	<i>384</i>						
<i>shale</i>	<i>384</i>	<i>421</i>						
<i>lime</i>	<i>421</i>	<i>427</i>						
<i>sand (gas)</i>	<i>427</i>	<i>435</i>						
<i>lime</i>	<i>435</i>	<i>445</i>						
<i>shale</i>	<i>445</i>	<i>506</i>						
<i>sand</i>	<i>506</i>	<i>571</i>						
<i>shale</i>	<i>571</i>	<i>615</i>						

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**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 21192  
LOCATION Euro, KS  
FOREMAN Steve Mead

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

**FIELD TICKET & TREATMENT REPORT  
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-29-09	5337	Mepherston B 13	13	213	16E	Me
CUSTOMER Mepherston Drilling LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 127			530	Cliff		
CITY Sycamore			515	Jerald		
STATE KS						
ZIP CODE 67363						

JOB TYPE Long string HOLE SIZE 5 1/4 HOLE DEPTH 1616 CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH 1006 DRILL PIPE \_\_\_\_\_ TUBING 2 3/8 OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/ek \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 6 bbls DISPLACEMENT PSI 500\* MIX PSI Bump Plug 900\* RATE 1/2 bbl/min Rate

REMARKS: Safety Meeting: Rig up to 2 3/8 Tubing. 13 peak circulation with  
Fresh water Mix 150# Gel Flush, 5 bbls, water spacer. Mix 150 sks  
60/40 Poz mix cement w 2% Gel, 1% CaCl2 At 14.2\* per gal. Shut  
down. Wash out pump & lines. Stuff 2 plugs. Displace with 6 bbls  
Fresh water final pumping pressure 500\* Bump Plug 900\*. Shut well  
in with 900\* Good cement Returns to surface.  
Job complete Rig down

*Thank you*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	870.00	870.00
5406	40	MILEAGE	3.45	138.00
1131	150 sks	60/40 Poz mix cement	10.70	1605.00
1118A	250*	Gel 2%	.16	40.00
1102	125*	CaCl2 1%	.71	88.75
1118B	150#	Gel Flush	.16	24.00
5407	6.43 Tons	Ton mileage Bulk Truck	MIC	296.00
4402	2	2 3/8 Rubber Plugs	22.00	44.00
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		Sub Total		3105.75
		SALES TAX		95.49
		ESTIMATED TOTAL		3201.24

Fravin 3737

029808

AUTHORIZATION Witness by Mae Mepherston

TITLE Owner

DATE \_\_\_\_\_

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

TICKET NUMBER **45638**

FIELD TICKET REF # 11095

LOCATION Thompson

FOREMAN Earl Winkler

**TREATMENT REPORT  
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-8-09		McMannan #13				
CUSTOMER <u>MacPherson Drilling</u>						
MAILING ADDRESS						
CITY		STATE	ZIP CODE			

TRUCK #	DRIVER	TRUCK #	DRIVER
524	Chad		
458	Marcus		
488/1702	Steve		
293	Tosh		

**WELL DATA**

CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
9 5/8 - 3 1/2	16

**TYPE OF TREATMENT**  
Acid Spot / Sand Fracture

**CHEMICALS**

<u>Crly. H<sub>2</sub>O</u>	<u>100% HCl Acid</u>
<u>HCl Sub</u>	<u>Inhibitor</u>
<u>20% Gel Breaker</u>	<u>Alum. Emul.</u>
<u>Bio-sol</u>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
Perf	15	110				BREAKDOWN 2000
20/110			5-75	100		START PRESSURE
11/20			5-2	1000		END PRESSURE
8/12			1-2	1000		BALL OFF PRESS
12/20 2 1/2 balls				100		ROCK SALT PRESS
12/20			2-2	100		ISIP 425
3/12			1-2	1000		5 MIN
12/20 2 1/2 balls						10 MIN
600				4000		15 MIN
						MIN RATE
						MAX RATE
						DISPLACEMENT

REMARKS: Spot and to perf - breakdown and stage

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AUTHORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_