

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 # 32218
Name: TDR Construction, Inc.
Address: 1207 N. 1st Street East
City/State/Zip: Louisburg, KS. 66053
Purchaser: CMT
Operator Contact Person: Lori Diskell
Phone: (913) 406-4236
Contractor: Name: Town Oilfield Service, Inc.
License: 33715

Wellsite Geologist: _____
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover
_____ Oil _____ SWD _____ SLOW _____ 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. _____
10/27/08 _____ 10/30/08 _____ 10-1-09 _____
Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API No. 15 - 121-28686-00-00
County: Miami
S/2 NE NE SW Sec. 24 Twp. 16 S. R. 23 East West
2145 feet from (S) N (circle one) Line of Section
2970 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Hurlbut Well #: G-1
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 1028 Kelly Bushing: _____
Total Depth: 662' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 20'
feet depth to surface w/ 3 ^{sx cmt.}

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 1500-3000 ppm Fluid volume 80 bbls
Dewatering method used on lease
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

Alt 2-Dig - 11/13/09

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: Lori Diskell
Title: Agent Date: 11-2-09
Subscribed and sworn to before me this 2nd day of November
09
Notary Public: _____
Date Commission Expires: 9-29-10

NOTARY PUBLIC - State of Kansas
LESLI STUTEVILLE
My Appt. Exp. 9-29-10

KCC Office Use ONLY
N Letter of Confidentiality Received
If Denied, Yes Date: _____
_____ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution

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Operator Name: TDR Construction, Inc. Lease Name: Hurlbut Well #: G-1
 Sec. 24 Twp. 16 S. R. 23 East West County: Miami

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	9	6 1/4"		20'	Portland	5	
Completion	5 5/8"	2 7/8"		639'	Portland	32	50/50 POZ

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

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
	Open Hole		

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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 <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Miami County, KS
Well: Hurlbut G-1
Lease Owner:TDR

Town Oilfield Service, Inc.
(913) 710 - 5400

Commenced Spudding:
10/27/08

WELL LOG

Thickness of Strata	Formation	Total Depth
2	Soil	2
12	Rocks/Lime	14
44	Shale	58
3	Lime	61
11	Shale	72
13	Lime	85
9	Shale	94
13	Lime	107
2	Shale	109
12	Sandy Shale	121
10	Shale	131
2	Lime	133
2	Red Bed	135
4	Shale	139
6	Lime	145
6	Dark Shale/Slate	151
5	Lime	156
23	Shale	179
2	Lime	181
30	Shale	211-Some gas odor
6	Lime	217
22	Shale	239-Made Water
22	Lime	261
2	Dark Shale/Slate	263
16	Lime	279-Hertha
14	Sand	293-Some Bleed, Good Odor
19	Shale	312
30	Sand/Shale Mix	342
86	Shale	428
4	Lime	432
39	Shale	471
4	Lime	475
7	Shale	482
45	Lime	527
135	Shale	662-TD

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