



KANSAS CORPORATION COMMISSION 1033055
OIL & GAS CONSERVATION DIVISION

Form CP-1
March 2009

This Form must be Typed
Form must be Signed
All blanks must be Filled

WELL PLUGGING APPLICATION
Please TYPE Form and File ONE Copy

OPERATOR: License #: 31451
Name: Troy Jaco, Inc.
Address 1: 200 N TRAVIS ST STE 412
Address 2: PO BOX 1476
City: SHERMAN State: TX Zip: 75091 +
Contact Person: Troy Jaco
Phone: (903) 868-2703

API No. ~~4~~ - 15-035-24085-00-00
If pre 1967, supply original completion date: _____
Spot Description: _____
NW. NW. NE NE Sec. 30 Twp. 31 S. R. 4 East West
5.052 Feet from North / South Line of Section
1.063 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Cowley
Lease Name: RICHARDSON Well #: 5-30

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: E27532.1 Gas Storage Permit #: _____
Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: 8.625 Set at: 234 Cemented with: 135 Sacks
Production Casing Size: 4.5 Set at: 2410 Cemented with: 185 Sacks

List (ALL) Perforations and Bridge Plug Sets:

PerforationTop PerforationBase Formation BridgePlugDepth

Elevation: 1134 (G.L. / K.B.) T.D.: 2410 PBTD: 2406 Anhydrite Depth: _____
(Stone Corral Formation)

Condition of Well: Good Poor Junk in Hole Casing Leak at: _____
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

per KCC rules and regulations

Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes No

If ACO-1 not filed, explain why:

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Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: Brian Love
Address: 14546 91st Road City: Winfield State: KS Zip: 67156 +
Phone: (620) 222-4563
Plugging Contractor License #: 3004 Name: Gressel Oilfield Service, Inc.
Address 1: PO BOX 607 Address 2: _____
City: BURRTON State: KS Zip: 67020 + 0607
Phone: (620) 463-5161

Proposed Date of Plugging (if known): _____

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

PKT
D15+3

FORM MUST BE TYPED

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 31451
Name: Troy Jaco, Inc.
Address P.O. Box 1476

City/State/Zip Sherman, Texas 75091

Purchaser: Total Petroleum, Inc.

Operator Contact Person: Troy Jaco

Phone (903) 868-2703

Contractor: Name: _____

License: _____

Wellsite Geologist: Thomas J. Jeffrey

Designate Type of Completion

- New Well Re-Entry Workover
- Oil SWD S10W Temp. Abd.
- Gas ENHR S10W
- Dry Other (Core, WSV, Expl., Cathodic, etc)

If Workover/Re-Entry, old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

- Deepening Re-perf. Conv. to inj/SWD
- Plug Back ENHR PSTD
- Commingled _____ Docket No. _____
- Dual Completion _____ Docket No. _____
- Other (SWD or inj?) _____ Docket No. _____

5-30-96 6-3-96 6-14-96
Spud Date Date Reached TD Completion Date

API NO. 15. 035-24085

County Cowley

NW-NE-NE Sec. 30 Twp. 31S Rge. X E

330 Feet from NW (circle one) Line of Section

990 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Richardson Well # 5-30

Field Name Akron

Producing Formation Layton

Elevation: Ground 1135 KB 1145

Total Depth 2406 PSTD _____

Amount of Surface Pipe Set and Cemented at 234 Feet

Multiple Stage Cementing Collar Used? _____ Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sz cat.

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 Rng. _____ E/W

County _____ Docket No. _____

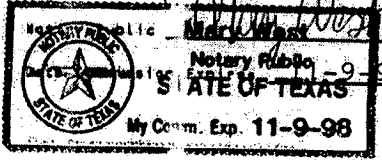
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on 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 Troy Jaco

Title President Date 11-7-96

Subscribed and sworn to before me this 7th day of November, 19 96.



Mary West

K.C.C. OFFICE USE ONLY		
F	Letter of Confidentiality Attached	
G	Wireline Log Received	
C	Geologist Report Received	
Distribution		
_____	KCC	_____ SWD/Rep
_____	KGS	_____ Plug
_____		_____ Other
(Specify)		

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Form ACD-1 (7-91)

Operator Name Troy Jac Inc. Lease Name Rardson Well # 5-30
 Sec. 30 Twp. 31S Rge. 4 East West County Cowley

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time test 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 during test. Attach extra sheets if more space is needed. Attach copy of log.

Drill Stem Test Taken Yes No
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run (Submit Copy) Yes No
 List All E.Logs Run:
 Neutron/Density
 Dual Induction

Name	Top	Datum
Latan Lime	1930	GL
Upper Stalnaker Sand	1940	GL
Lower Stalnaker Sand	1982	GL
Perry	2150	GL
Lignite	2326	GL
Layton Lime	2374	GL
Layton "A" Sand (por.)	2385	GL

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	12 1/4	8 5/8	24	234	Reg.	135	Reg. 3% + 2%
Production	7 7/8	4 1/2	10.5	2410	Reg.	185	Reg. 2% gel + 1% CC

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 (Amount and Kind of Material Used) Depth
3	2389' - 2394'	100 lbs. 20-40, 12-20 & 8-12 Sand. 300 gals 15% mud acid

TUBING RECORD									
Size	Set at	Packer At	Liner Run						
2 3/8	2380'	2381	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Date of First Resumed Production, SWD or Inj.		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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity				
2.9	0		29		38°				

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: 2389-2394

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Mark Parkinson, Governor
Thomas E. Wright, Chairman
Michael C. Moffet, Commissioner
Joseph F. Harkins, Commissioner

November 18, 2009

Troy Jaco
Troy Jaco, Inc.
200 N TRAVIS ST STE 412
PO BOX 1476
SHERMAN, TX 75091

Re: Plugging Application
API 15-035-24085-00-00
RICHARDSON 5-30
NE/4 Sec.30-31S-04E
Cowley County, Kansas

Dear Troy Jaco:

This letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1, for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. **Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113(b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit in accordance with K.A.R. 82-3-600.**

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well. This notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

This notice is void after May 17, 2010. The CP-1 filing does not bring the above well into compliance with K.A.R 82-3-111 with regard to the Commission's temporary abandonment requirements.

Sincerely,
Production Department Supervisor

cc: District 2

(316) 630-4000

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