

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 # 33858
Name: J & J Operating, LLC.
Address 1: 10380 W. 179th Street
Address 2: _____
City: Bucyrus State: KS Zip: 66067 + _____
Contact Person: Patrick Everett
Phone: (913) 549-8442
CONTRACTOR: License # 32834
Name: JTC Oil, INC.
Wellsite Geologist: _____
Purchaser: Pacer Energy Marketing
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.: _____
11/20/2009 11/21/2009 12/03/2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 045-21607-00-00
Spot Description: SW SW NE
_____ SW _____ NE Sec. 31 Twp. 13 S. R. 21 ☒ East ☐ West
2970 Feet from ☐ North / ☒ South Line of Section
2310 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☒ NE ☐ NW ☒ SE ☐ SW
County: Douglas
Lease Name: Kelco Well #: I-6
Field Name: Wildcat
Producing Formation: Squirrel
Elevation: Ground: 949 Kelly Bushing: NA
Total Depth: 800 Plug Back Total Depth: None
Amount of Surface Pipe Set and Cemented at: 42 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 42
feet depth to: surface w/ 8 sx cmt.

Drilling Fluid Management Plan AH II NR 2-11-10
(Data must be collected from the Reserve Pit)
Chloride content: 1500-3000 ppm Fluid volume: 94 bbls
Dewatering method used: 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.: _____

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]

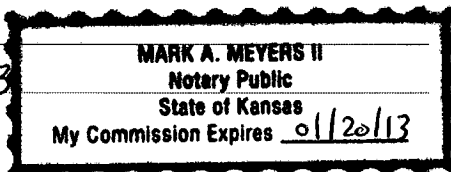
Title: Agent Date: 2/6/10

Subscribed and sworn to before me this 5th day of February

20 10

Notary Public: Mark Meyer

Date Commission Expires: 01/20/13



KCC Office Use ONLY	
<u>N</u>	Letter of Confidentiality Received
<u>✓</u>	If Denied, Yes ☐ Date: _____
<u>✓</u>	Wireline Log Received
<u>_____</u>	Geologist Report Received
<u>_____</u>	UIC Distribution

RECEIVED

FEB 08 2010

KCC WICHITA

Operator Name: J & J Operating, LLC. Lease Name: Kelco Well #: I-6
 Sec. 31 Twp. 13 S. R. 21 ☒ 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 ☐ Yes ☒ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

Gamma Ray / Neutron

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum
 No Geologist on well site

CASING RECORD ☒ New ☐ 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	8 5/8	6 1/4	8	42	Portland	8	
Casing	5 5/8	2 7/8	6.5	783	Portland	125	50 / 50 POZ

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
2	34 perforations at 728.0 to 744.0		
TUBING RECORD: Size: Set At: Packer At:		Liner Run: ☐ Yes ☐ No	
Date of First, Resumed Production, SWD or Enhr.		Producing Method: ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

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: _____ _____	
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CONSOLIDATED
ONLINE Services, LLC

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

TICKET NUMBER 22469
LOCATION Ottawa
FOREMAN Alan Mader

FIELD TICKET & TREATMENT REPORT

DATE		CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
11-27-09		4028	W Kelco I-6		NE 31	13	21	D.G.
CUSTOMER								
J & J Operating								
MAILING ADDRESS								
10380 W 179th								
CITY		STATE	ZIP CODE					
Bucyrus		KS						
					TRUCK #	DRIVER	TRUCK #	DRIVER
					516	Alan M		
					495	Casey K		
					369	Chuck L		
					510	Jason H		

JOB TYPE long string HOLE SIZE 6 1/4 HOLE DEPTH 800 CASING SIZE & WEIGHT 2 3/8
CASING DEPTH 783 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT _____ DISPLACEMENT PSI 500 MIX PSI 200 RATE 5 bpm

DISPLACEMENT _____ DISPLACEMENT PSI 500 MIX PSI 200 RATE 0.5 gpm
REMARKS: Checked casing depth. Mixed & pumped 200# gel
to flush hole followed by 125 SK 50150 poz & 20 gel,
1/2# Pheno seal. Circulated cement. Flushed pump.
Pumped plug to casing ID. Well held 800 PSI for
30 min NIT. Set float & closed valve.

Alan Mader

[illegible]

Ravin 3737

AUTHORIZATION

TITLE

DATE _____