

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

Form ACO-1  
June 2009

Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 32073  
Name: Thompson Oil Company  
Address 1: 2260 North Dakota Road  
Address 2: \_\_\_\_\_  
City: Iola State: Ks Zip: 66749 + \_\_\_\_\_  
Contact Person: Jerry Thompson  
Phone: ( 620 ) 363-1045  
CONTRACTOR: License # 33977  
Name: EK Energy  
Wellsite Geologist: \_\_\_\_\_  
Purchaser: Pacer

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SIOW  
 Gas     D&A     ENHR     SIGW  
 OG     GSW     Temp. Abd.  
 CM (Coal Bed Methane)  
 Cathodic     Other (Core, Expl., 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  
 Conv. to GSW  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled    Permit #: \_\_\_\_\_  
 Dual Completion    Permit #: \_\_\_\_\_  
 SWD    Permit #: \_\_\_\_\_  
 ENHR    Permit #: \_\_\_\_\_  
 GSW    Permit #: \_\_\_\_\_

<u>07/20/2010</u>	<u>07/22/2010</u>	<u>07/22/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. ~~15~~ - 15-001-30065-00-00  
Spot Description: \_\_\_\_\_  
ne sw sw se Sec. 5 Twp. 24 S. R. 19  East  West  
385 Feet from  North /  South Line of Section  
2,183 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Allen  
Lease Name: East Monfort Well #: BI-9  
Field Name: Iola  
Producing Formation: Tucker  
Elevation: Ground: 1096 est Kelly Bushing: \_\_\_\_\_  
Total Depth: 1038 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: 1029.8  
feet depth to: surface w/ 125 sx cmt.

**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 #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

**AFFIDAVIT**

I am the affiant and I hereby certify that 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: Jerry Thompson  
Title: owner Date: 09/07/2010

**KCC Office Use ONLY**

Letter of Confidentiality Received  
Date: \_\_\_\_\_  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: DG Date: 9/14/10  
**RECEIVED**

SEP 09 2010

KCC WICHITA

Operator Name: Thompson Oil Company Lease Name: East Monfort Well #: BI-9  
 Sec. 5 Twp. 24 S. R. 19  East  West County: Allen

**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 complete copy of all Electric Wire-line 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

Electric Log Submitted Electronically  Yes  No  
 (If no, Submit Copy)

Log Formation (Top), Depth and Datum  Sample

Name Top Datum

see attached log

List All E. Logs Run:

CASING RECORD <input type="checkbox"/> New <input checked="" 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	12.25	8 5/8	20	20 ft	portland	5	n/a
long string	5 7/8	2 7/8	6.5	1029.8	portland	125	n/a

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

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. 08/17/2010

Producing Method:  Flowing  Pumping  Gas Lift  Other (Explain) \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	0	30	n/a	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>1029.8-1038</u>
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**Lone Jack Oil Company**  
**509 East Walnut**  
**Blue Mound, KS 66010**

**Invoice**

*Received  
 7-24-2010  
 line 167*

Date	Invoice #
7/23/2010	1082

<b>Bill To</b>
Jerry Thompson Thompson Oil 2260 North Dakota Rd. Iola, KS 66749

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	<b>East Monfort</b>		
1	Lease 7/22/10, Well BI-9, circulated 125 sacks of cement to surface, pumped 257 gallons of water behind cement and shut in.	600.00	600.00T
1	Water Truck	100.00	100.00T
	Sales Tax	7.30%	51.10
	<i>DMJ            7-24-2010            CR# 5549</i> <div style="border: 1px solid black; border-radius: 50%; width: 150px; height: 100px; margin: 10px auto; display: flex; align-items: center; justify-content: center;"> <span style="font-size: 24px; font-weight: bold;">1394.90</span> </div>		

<b>Thank you for your business.</b>	<b>Total</b> RECEIVED <b>751.10</b>
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SEP 09 2010  
 KCC WICHITA

**PAYLESS CONCRETE PRODUCTS, INC.**

P.O. BOX 664  
802 N. INDUSTRIAL RD.  
IOLA, KS 66749

Voice: 620-365-5588  
Fax:

entered 7-31-10  
**INVOICE**

Invoice Number: 27050-51  
Invoice Date: Jul 22, 2010  
Page: 1  
Duplicate

<b>Bill To:</b>
CASH FOR C.O.D.'S 802 N. INDUSTRIAL RD. IOLA, KS 66749

<b>Ship to:</b>
JEROME THOMPSON 2260 N. DAKOTA RD. IOLA, KS 66749

Customer ID	Customer PO	Payment Terms	
CASH/C.O.D.	THOMPSON/WELL#B19	C.O.D.	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	TRUCK		7/22/10

Quantity	Item	Description	Unit Price	Amount
62.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 7/22/10 TICKET#27050	7.60	475.00
1.00	TRUCKING	TRUCKING CHARGE 7/22/10 TICKET#27050	50.00	50.00
62.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 7/22/10 TICKET#27051	7.60	475.00

PAID  
7-29-10  
CK # 5551  
1073.01

Subtotal	1,000.00
Sales Tax	73.01
Total Invoice Amount	1,073.01
Payment/Credit Applied	
<b>TOTAL</b>	<b>1,073.01</b>

Check/Credit Memo No:

RECEIVED  
SEP 09 2010  
KCC WICHITA