



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1046542

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 # 33702  
Name: Magnum Engineering Company  
Address 1: 500 N SHORELINE BLVD STE 322  
Address 2: \_\_\_\_\_  
City: CORPUS CHRISTI State: TX Zip: 78401 + 0313  
Contact Person: Anil Pahwa  
Phone: ( 361 ) 882-3858  
CONTRACTOR: License # 34133  
Name: Kurtis Energy LLC  
Wellsite Geologist: n/a  
Purchaser: \_\_\_\_\_

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 #: \_\_\_\_\_

08/05/2010 08/12/2010 10/12/2010  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 15-125-31978-00-00

Spot Description: \_\_\_\_\_  
SE SE NW SE Sec. 4 Twp. 34 S. R. 14 ☒ East ☐ West  
1,600 Feet from ☐ North / ☒ South Line of Section  
1,600 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Montgomery

Lease Name: Defenbaugh C.J. Well #: 22

Field Name: \_\_\_\_\_

Producing Formation: Wayside and Weiser

Elevation: Ground: 881 Kelly Bushing: 881

Total Depth: 835 Plug Back Total Depth: 827

Amount of Surface Pipe Set and Cemented at: 22 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: 827  
feet depth to: 0 w/ 90 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

Submitted Electronically

**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: NAOMI JAMES Date: 11/04/2010



1046542

Operator Name: Magnum Engineering Company Lease Name: Defenbaugh C.J. Well #: 22  
 Sec. 4 Twp. 34 S. R. 14 ☒ 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 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)

List All E. Logs Run:

GR-N

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

Name Top Datum

Wayside 695

Weiser 797

### 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	12	8.625	20	22	Portland	9	
Production	6.75	4.50	11.5	827	Ticket attached	90	Ticket attached

### 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	19	15% HCL, 12/20 & 16/30 sand	710'-729'
3	6	15% HCL, 12/20 & 16/30 sand	798'-804'

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. 10/19/2010		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. 1.5	Gas Mcf	Water Bbls. 20	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)		METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" 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: 710'-729' 798'-804'	
--	--	--	--	--	--



**CONSOLIDATED**  
Oil Well Services, LLC

O Box 884, Chanute, KS 66720  
20-431-9210 or 800-467-8676

# 235855

TICKET NUMBER 27778

LOCATION Bartholomew, OK

FOREMAN Kirk Sanders

# FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-12-10	5623	DeFauvroux #22				Montgomery
CUSTOMER <u>Magnum</u>						
MAILING ADDRESS						
CITY						
STATE						
ZIP CODE						
			TRUCK #	DRIVER	TRUCK #	DRIVER
			398	John		
			551	Bryan / J		
			Nunnelay's			

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH 835' CASING SIZE & WEIGHT 4 1/2  
CASING DEPTH 827' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT 14.5 SLURRY VOL 1.58 WATER gal/sk 6.95 CEMENT LEFT in CASING 0  
DISPLACEMENT 13.1 DISPLACEMENT PSI 400 MIX PSI 200 RATE 4.5 bpm

REMARKS: Ran gel/lcm to est. circ., ran 90sk of Thick Set Cement. Blashed out pump & lines, dropped plug & disp. to set. Shut down & started up. Plug landed @ 12.1 bbl. (one bbl early). Landed plug @ 1000'. Plug held. — Circ. Cement to Surf. —

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE (Long String)		900.00
5406	30	MILEAGE		106.50
5407	1	Bulk Trk		350.00
5402	840'	Footage		1168.00
5501C	3hrs.	Transport		324.00
1126A	90sk	Thick Set Cement	#	1530.00
1107A	40 <sup>oz</sup>	Flame Seal	#	46.00
1110A	500 <sup>oz</sup>	Kal Seal	#	325.00
1111	500 <sup>oz</sup>	Granulated Salt	#	1165.00
1118B	150 <sup>oz</sup>	Premium Gel	#	30.00
1123	4200gal	City Water	#	62.58
4404	1	4 1/2 Rubber Plug	#	45.00
15% Discounted Price \$3,562.39				
Customer was not present				
SALES TAX				139.84
ESTIMATED TOTAL				4190.22

AUTHORIZATION \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.