Corrected Total Depth

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 # 9090	API No. 15 - 185-23609 -005
Name: Charter Energy, Inc.	Spot Description:
Address 1: P.O. Box 252	ne_sw_se_se_Sec. 4 Twp. 22 S. R. 13 East West
Address 2:	400 Feet from North / South Line of Section
City: Great Bend State: Ks Zip: 67530 + 0252	960 Feet from Feet from Sat / West Line of Section
Contact Person: Steve Baize	Footages Calculated from Nearest Outside Section Corner:
Phone: (620) 793-9090	I
RECEIVED	☐ NE ☐ NW ☑ SE ☐ SW County: Stafford
	Lease Name: Blakeslee Well #: 1
Name:	
Wellsite Geologist:	Field Name: Gates
Purchaser: KCC WICHITA	Producing Formation: Arbuckle
Designate Type of Completion:	Elevation: Ground: 1889 Kelly Bushing: 1894
☐ New Well ☐ Re-Entry ☐ Workover	Total Depth: 3777 Plug Back Total Depth:
☐ Oil ☐ WSW ☐ SWD ☐ SIOW	Amount of Surface Pipe Set and Cemented at: Feet
☐ Gas ☐ D&A ☐ ENHR ☐ SIGW	Multiple Stage Cementing Collar Used? Yes No
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	D. W Fluid M.
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	,
☐ Deepening · ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	Chloride content: ppm Fluid volume: bbls
Conv. to GSW	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	QuarterSecTwpS. R
ENHR Permit #:	
GSW Permit #:	County: Permit #:
226-16 3-4-10 3-9-10 Spud Date or Date Reached TD Completion Date or	
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas 67202, within 120 days of the spud date, recompletion, workover or copy of side two of this form will be held confidential for a period of 12 months if requitality in excess of 12 months). One copy of all wireline logs and geologist well BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form	Inversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information uested in writing and submitted with the form (see rule 82-3-107 for confident report shall be attached with this form. ALL CEMENTING TICKETS MUST
AFFIDAVIT	KCC Office Use ONLY
am the affiant and I hereby certify that all requirements of the statutes, rules and re	egu-
ations promulgated to regulate the oil and gas industry have been fully complied want the statements herein are complete and correct to the best of my knowledge.	
and the distribution in Frenchis Complete and correct to the best of my knowledge	Confidential Release Date:
Signatura: Alles ()	Wireline Log Received
Signature:	Geologist Report Received
Fitle:	UIC Distribution
	ALT I XII III Approved by: Dic Date: 126 (0