

KANSAS CORPORATION COMMISSION 1048123
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 33348
Name: Deer Run Oil Lease, LLC
Address 1: 2322 CR 1425
Address 2:
City: CANEY State: KS Zip: 67333 + 8529
Contact Person: Jim Nunneley
Phone: (620) 515-2337
CONTRACTOR: License # 5989
Name: Finney, Kurt dba Finney Drilling Co.
Wellsite Geologist: Jim Nunneley
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 #:

| | | |
|-----------------------------------|-----------------|---|
| 4/15/2010 | 4/19/2010 | 4/19/2010 |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-125-31949-00-00

Spot Description:

NW SW SW NW Sec. 18 Twp. 34 S. R. 15 ☒ East ☐ West
2,988 Feet from ☐ North / ☒ South Line of Section
4,970 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Montgomery

Lease Name: Snell Well #: DR#1

Field Name: Wayside-Havana

Producing Formation: Wayside

Elevation: Ground: 832 Kelly Bushing: 0

Total Depth: 625 Plug Back Total Depth:

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: 613
feet depth to: 0 w/ 60 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 160 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: Deanna Garrison Date: 12/14/2010



1048123

Operator Name: Deer Run Oil Lease, LLCLease Name: SnellWell #: DR#1Sec. 18 Twp. 34 S. R. 15 ☒ East ☐ WestCounty: 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:

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

Name Top Datum

Log Attached

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 | 12.25 | 7 | 19 | 21.75 | 1 | 8 | |
| Production | 5.875 | 2.875 | 6.5 | 612.57 | Class A | 60 | |
| | | | | | | | |

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: <input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------|-------|---------|------------|---|

| | |
|---|---|
| Date of First, Resumed Production, SWD or ENHR. | Producing Method: <input type="checkbox"/> Flowing <input 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 |
|-----------------------------------|-----------|---------|-------------|---------------|---------|

| | | |
|--|---|--|
| 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 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: _____ _____ |
|--|---|--|

CONSOLIDATED
Oil Well Services, LLC

234999

TICKET NUMBER 27635
LOCATION Bartholomew, OK
FOREMAN Donnie Tate

14, Chanute, KS 66720
9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|---|------------|--------------------|----------------|----------|-------|--------------|
| 12-10 | 3102 | DR - 1 | 18 | 34 | 15E | Marshall, KS |
| CUSTOMER <u>DEER CREEK RUN OIL LEASE</u> | | | | | | |
| MAILING ADDRESS | | | | | | |
| CITY | | | STATE ZIP CODE | | | |
| | | | | | | |

| TRUCK # | DRIVER | TRUCK # | DRIVER |
|---------|-------------|---------|--------|
| 419 | JAMES N | | |
| 551 | DAVE | | |
| TD | Donnie Tate | | |

JOB TYPE LS HOLE SIZE 5 1/2 HOLE DEPTH 625 CASING SIZE & WEIGHT 2 7/8 6.1
CASING DEPTH 620 DRILL PIPE TUBING OTHER
SLURRY WEIGHT 13.8 SLURRY VOL 1.75 WATER gal/sk 8.5 CEMENT LEFT IN CASING 0
DISPLACEMENT 3.6 DISPLACEMENT PSI 300 MIX PSI 150 RATE 4

REMARKS: WASH DOWN - RUN 60% GEL AMMO - RUN 60% THICK SET 45# KOL
1.75 PHEO - WASH OUT PUMP AND LINES - RELEASE PLUGS (2) - Displacing
3.6 BBL TO LAND PLUG

CMT TD SURE

Thank you

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|---------------------|-------------------------------------|------------|---------------------|
| 5401 | 1 | PUMP CHARGE | | 900. ⁰⁰ |
| 5406 | 33 | MILEAGE | | 117. ⁵⁰ |
| 5402 | 620 | FOOTAGE | | 124. ⁰⁰ |
| 5407 | 1 | BANK TRUCK | | 350. ⁰⁰ |
| 5501C | 2 VHR | TRANSPORT | | 216. ⁰⁰ |
| 1126A | 60sx | THICK SET | | 990. ⁰⁰ |
| 1110A | 62/300 ⁺ | KOL SEAL | | 189. ⁰⁰ |
| 1107A | 1/2/40 ⁺ | PHEO | | 48. ⁰⁰ |
| 1123 | 4620 GAL | CITY WATER | | 66. ⁹⁹ |
| 43104400 | 2 | 2 7/8 RUBBER PLUG | | 50. ⁰⁰ |
| | | 10% DISCOUNT IF PAID WITHIN 10 DAYS | | |
| | | 3122. ⁰⁰ | | |
| | | Dis: 312.20 | | |
| | | TOTAL | | |
| | | 2807.10 | 5.38 | SALES TAX |
| | | | | ESTIMATED TOTAL |
| | | | | 3119. ⁰⁰ |

Ravin 3737

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.

