

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 # 6142

Name: Town Oil Company, Inc.

Address 1: 16205 W. 287th Street

Address 2: \_\_\_\_\_

City: Paola State: KS Zip: 66071 + 8482

Contact Person: Lester Town

Phone: ( 913 ) 294-2125

CONTRACTOR: License # 6142

Name: Town Oil Company, Inc.

Wellsite Geologist: \_\_\_\_\_

Purchaser: Pacer Energy Marketing

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

11/3/2010	11/5/2010	12/5/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 059-25520-00-00

Spot Description: \_\_\_\_\_

SE SE NE NE Sec. 24 Twp. 17 S. R. 21 ☒ East ☐ West

4,145 Feet from ☐ North / ☒ South Line of Section

165 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☒ SW

County: Franklin

Lease Name: Killough Well #: 8

Field Name: Paola-Rantoul

Producing Formation: Squirrel

Elevation: Ground: 976 Kelly Bushing: NA

Total Depth: 742 Plug Back Total Depth: 10

Amount of Surface Pipe Set and Cemented at: 21 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

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

If Alternate II completion, cement circulated from: 21

feet depth to: Surface w/ 3 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 1500-3000 ppm Fluid volume: 80 bbls

Dewatering method used: on lease

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: Roberta Town

Title: Agent Date: 12-22-10

KCC Office Use ONLY

**RECEIVED**

**DEC 27 2010**

**KCC WICHITA**

☐ Letter of Confidentiality Received

Date: \_\_\_\_\_

☐ Confidential Release Date: \_\_\_\_\_

☒ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

ALT ☐ I ☒ II ☐ III Approved by: Dlg Date: 12/29/10

Operator Name: Town Oil Company, Inc. Lease Name: Killough Well #: 8  
 Sec. 24 Twp. 17 S. R. 21 ☒ East ☐ West County: Franklin

**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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets)  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, Submit Copy)  List All E. Logs Run:  <div style="text-align: center;">Gamma Ray Neutron Completion Log</div>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <div style="display: flex; justify-content: space-between;"> <span>Name</span> <span>Top</span> <span>Datum</span> </div> <div style="text-align: center; margin-top: 20px;">(See Attached Log)</div>
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CASING RECORD <input type="checkbox"/> New <input 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	7	6 1/4		21	Portland	3	
Completion	5 5/8	2 7/8		732	Portland	94	50/50 POZ

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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	696.0-700.0 (13 shots)		

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: _____ _____
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Franklin County, KS  
Well: Killough # 8  
Lease Owner: T.O.C.

Town Oilfield Service, Inc.  
(913) 837-8400

Commenced Spudding:  
11/3/2010

# WELL LOG

Thickness of Strata	Formation	Total Depth
6	Soil and Clay	6
10	Lime	16
10	Shale	26
20	Lime	46
13	Shale	59-Lime Streaks
8	Lime	67
6	Shale	73
28	Lime	101
79	Shale	180-Lime Streaks
20	Lime	200
9	Shale	209
7	Lime	216
13	Shale	229
7	Lime	236
22	Shale	258
9	Lime	267-Drum
24	Shale	291
24	Lime	315-Winterset
10	Slate-Shale	325
23	Lime	348-Bethany Falls
4	Slate-Shale	352
3	Lime	355-KC
3	Slate-Shale	358
4	Lime	362-Hertha
113	Shale	475-Lime Streaks
5	Limey Shale	480
28	Shale	508-Dark
11	Shale	519-Lime Streaks
6	Lime	525
39	Shale	564
10	Lime	574
11	Shale	585-Dark
3	Lime	588-Brown/Hard
11	Shale	599
12	Sandy Shale	611
7	Lime	618-Odor Starts
7	Shale	625-Gray, No Show
3	Sand	628-Solid, Good Show, Odor
10	Sand	638-Broken, Good Bleed
39	Shale	677-Dark

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DEC 27 2010  
OCC WICHITA

Franklin County, KS  
Well: Killough # 8  
Lease Owner: T.O.C.

**Town Oilfield Service, Inc.**  
(913) 837-8400

Commenced Spudding:  
11/3/2010

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DEC 27 2010  
KCC WICHITA



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 237883

Invoice Date: 11/08/2010 Terms: 0/30,n/30

Page 1

TOWN OIL COMPANY  
16205 W. 287 STREET  
PAOLA KS 66071  
(785) 294-2125

KILLOUGH 8  
27249  
NE 1-17-20 FR  
11/05/2010

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	94.00	9.8400	924.96
1118B	PREMIUM GEL / BENTONITE	258.00	.2000	51.60
4402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00

  

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	925.00	925.00
368 EQUIPMENT MILEAGE (ONE WAY)	15.00	3.65	54.75
368 CASING FOOTAGE	732.00	.00	.00
503 MIN. BULK DELIVERY	1.00	315.00	315.00

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KCC WICHITA

Parts: 999.56 Freight: .00 Tax: 77.96 AR 2372.27  
Labor: .00 Misc: .00 Total: 2372.27  
Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

ELDORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

GILLETTE, WY  
307/686-4914

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

WORLAND, WY  
307/347-4577

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

TICKET NUMBER 27249  
LOCATION Ottawa KS  
FOREMAN Fred Maden

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/5/10	7823	Killough 8.	NE 1	17	20	FR
CUSTOMER Town Oil Co.						
MAILING ADDRESS 16205 W 287 <sup>th</sup>						
CITY Paola	STATE KS	ZIP CODE 66071				

JOB TYPE <u>long string</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>740</u>	CASING SIZE & WEIGHT <u>2 3/8 EUE 10.4</u>
CASING DEPTH <u>732</u>	DRILL PIPE <u>1 in</u>	TUBING <u>2 7/8</u>	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING <u>2 1/2" Plug</u>
DISPLACEMENT <u>4.24 BBL</u>	DISPLACEMENT PSI _____	MIX PSI _____	RATE <u>4 BPM</u>

REMARKS: Establish circulation. Mix + Pump 100# Premium Gel  
Flush. Mix + Pump 96 sls 50/50 Poz Mix Cement 2% Gel  
Cement to Surface. Flush pump + lines clean. Displace  
2 1/2" Rubber plug to pin in casing w/ 4.24 BBLs fresh  
water. Pressure to 600# ~~WPSI~~ Shut in casing.

Note: Customer Supplied Water.

Fred Mach

[illegible]

Ravin 3737

### AUTHORIZTION

# Winter Town

**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.**