

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6142
 Name: Town Oil Company, Inc.
 Address: 16205 West 287th St.
 City/State/Zip: Paola, Kansas 66071
 Purchaser: CMT
 Operator Contact Person: Lester Town
 Phone: (913) 294-2125
 Contractor: Name: Town Oil Company, Inc.
 License: 6142
 Wellsite Geologist: _____
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>9-7-10</u>	<u>9-21-10</u>	<u>11-18-10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 045-21674-00-00
 County: Douglas
~~SW NE~~
~~SE SW~~ - NW - SE Sec. 14 Twp. 13 S. R. 20 East West
1985 2100 feet from S / N (circle one) Line of Section
1990 1992 feet from E / W (circle one) Line of Section
GPS - KCC - Dig
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: John Gage Well #: JW-7B
 Field Name: Wakarusa
 Producing Formation: Squirrel
 Elevation: Ground: 823 Kelly Bushing: _____
 Total Depth: 662' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 42 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 42
 feet depth to surface w/ 6 sx cmt.

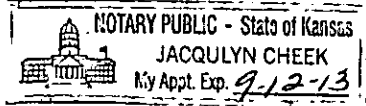
Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 1500-3000 ppm Fluid volume 80 bbls
 Dewatering method used on lease
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

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.

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: 12-20-10
 Subscribed and sworn to before me this 20th day of December
 20 10
 Notary Public: Jacquelyn Cheek
 Date Commission Expires: 9-12-13

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
AT 2 - Dig - 12/30/10
RECEIVED
DEC 27 2010



KCC WICHITA

C 0 0 0 0 0 0 0 0 0 0

Operator Name: Town Oil Company, Inc. Lease Name: John Gage Well #: JW-7B
 Sec. 14 Twp. 13 S. R. 20 East West County: Douglas

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <p style="text-align: center;">(SEE ATTACHED LOG)</p>
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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	9 5/8"	6 1/4"		42'	Portland	6sx	
Completion	5 5/8"	2 7/8"upset 8Rnd		649.9'	Portland	94sx	50/50 PozMix 2% Gel

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	616-624		

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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

Production Interval Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

TOWN OIL COMPANY, INC.

"Drilling and Production"

16205 W 287th Street
Paola, Kansas 66071

Fax# 913-294-4823

PHONE: 913-557-5482
913-294-2125

WELL: John Gage JW-7B

LEASE OWNER: Town Oil Company, Inc.

WELL LOG

Thickness of Strata	Formation	Total Depth
0-15	soil/clay	15
5	sand	20
12	lime	32
9	shale	41
6	lime	47
14	shale	61
20	lime	81
8	sand	89
4	lime	93
5	sand	98
15	shale	113
32	lime	145
35	sandy shale	180
12	lime	192
6	shale	198
8	lime	206
18	shale	224
10	lime	234
22	shale	256
10	lime	266
7	shale	273
33	lime	306
9	shale/slate	315
22	lime	337
4	shale	341
5	lime	346
2	shale/slate	348
8	lime	356
136	sandy shale	492
11	red bed	503
18	sandy shale	521
6	lime	527
14	shale	541
6	lime	551
17	shale	568
3	lime	571
44	shale	613
3	sand	616
4	sand	620
1	sand	621
3	sand	624
7	sand	631
31	sandy shale	662

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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 # 236736

Invoice Date: 09/23/2010 Terms: 0/30,n/30

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

GAGE JW-7B
27167
SE 14-13-20 DG
09/21/2010
KS

Part Number	Description	Qty	Unit Price	Total
1118B	PREMIUM GEL / BENTONITE	258.00	.2000	51.60
1124	50/50 POZ CEMENT MIX	92.00	9.8400	905.28
1402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00
	Description	Hours	Unit Price	Total
195	CEMENT PUMP	1.00	925.00	925.00
195	EQUIPMENT MILEAGE (ONE WAY)	30.00	3.65	109.50
195	CASING FOOTAGE	650.00	.00	.00
503	MIN. BULK DELIVERY	1.00	315.00	315.00

Parts: 979.88 Freight: .00 Tax: 71.54 AR 2400.92
Labor: .00 Misc: .00 Total: 2400.92
Sublt: .00 Supplies: .00 Change: .00

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DEC 27 2010

igned _____

KCC WICHITA

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

McALESTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27167
LOCATION Ottawa
FOREMAN Alan Mader

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9.21.10	7823	Gage JW-7B	SE 14	N3	20	DG
CUSTOMER			TRUCK # DRIVER TRUCK # DRIVER			
Town Oil			516	Alan M	Safety	Meeting
MAILING ADDRESS			495	Casey K	CE	
16205 W 287			503	Leel P	CB	
CITY		STATE	ZIP CODE			
Paola		KS	66071			

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 662 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 650 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 334 DISPLACEMENT PSI 800 MIX PSI 200 RATE 5 bpm
 REMARKS: Held crew meeting. Established rate. Mixed & pumped 100 # gel to flush hole followed by 94 sk 50/50 poz, 200 gel. Circulated cement. Flushed pump. Pumped plug to well head 800 PSI for 30 min MIT. Closed valve.

Town water Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	30	MILEAGE		109.50
5402	650'	casing footage		-
5407	min	ten miles		315.00
1118B	258#	gel		51.60
1124	92 sk	50/50 poz		905.28
1402	1	2 1/2 plug		23.00
<u>WO # 236736</u>			RECEIVED DEC 27 2010 KCC WICHITA	
			<u>7.37</u>	SALES TAX
				ESTIMATED
				TOTAL
				71.54
				2700.92

Ravin 3737
 AUTHORIZATION Wintow 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.