

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 # 04699
Name: Phillips Oil Properties, Inc.
Address 1: 1822 S. Mead
Address 2: _____
City: wichita State: ks Zip: 67211 + _____
Contact Person: Troy Phillips
Phone: (316) 265-7779
CONTRACTOR: License # 31539
Name: SAM'S Well Service
Wellsite Geologist: Troy Phillips
Purchaser: Plains

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: Camio Oil
Well Name: Hostetter #3

Original Comp. Date: 12-18-78 Original Total Depth: 3234

- ☐ Deepening ☐ Re-perf. ☒ Conv. to ENHR ☐ Conv. to SWD
☐ Conv. to GSW
- ☒ Plug Back: 3233 Plug Back Total Depth _____
☐ Commingled Permit #: _____
☐ Dual Completion Permit #: _____
☐ SWD Permit #: _____
☐ ENHR Permit #: _____
☐ GSW Permit #: _____

12-15-2010	12-15-2101	12-16-2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-035-21,952 -00-01

Spot Description: NE NW SW
NE NW SW Sec. 22 Twp. 33 S. R. 4 ☒ East ☐ West
2,339 Feet from ☒ North ☒ South Line of Section
4,489 Feet from ☒ East ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☒ NE ☐ NW ☐ SE ☐ SW

County: Cowley

Lease Name: Hostetter Well #: 3

Field Name: Posey NE

Producing Formation: Mississippian

Elevation: Ground: _____ Kelly Bushing: 1156

Total Depth: 3234 Plug Back Total Depth: 3233

Amount of Surface Pipe Set and Cemented at: 201existing Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

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: _____

Title: PRESIDENT Date: 2-2-11

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: Dis Date: 2/8/11

RECEIVED

FEB 07 2011

KCC WICHITA

Operator Name: Phillips Oil Properties, Inc. Lease Name: Hostetter Well #: 3
 Sec. 22 Twp. 33 S. R. 4 ☒ East ☐ West County: Cowley

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mississippian	3166 -2010
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Submitted Electronically (If no, Submit Copy)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E. Logs Run:			

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	12 3/4"	8 5/8"		201	common		
Production	7 7/8"	4 1/2"		3234	common		
Liner		3 1/2"		3135	Class A	150 to surf	3% CaCl ₂

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	3168-3173		
TUBING RECORD: Size: <u>2 3/8" SealTite</u> Set At: <u>3125'</u> Packer At: <u>3125'</u>		Liner Run: <input checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Oct 14 10 03:58p

p.1


CONSOLIDATED
 Oil Well Services, LLC

ENTERED

 TICKET NUMBER 28569
 LOCATION #20 Eldorado
 FOREMAN Jacob Storm

 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
10-14-10	6293	Hostetter #3 S2	22	33S	4E	Cowley
CUSTOMER Phillips Oil properties			SAFTY meeting			
MAILING ADDRESS 1822 S Mead			J.P.			
CITY Wichita	STATE KS	ZIP CODE 67211	K.I.V.			
			N.S.			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			446	Jeff		
			491	Kevin		
			511	Jacob		
			539	Larry		

 JOB TYPE Cement B HOLE SIZE 4 1/2 HOLE DEPTH _____ CASING SIZE & WEIGHT 3 1/2
 CASING DEPTH 3135 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT 28.5 DISPLACEMENT PSI 1100 MIX PSI 750 RATE 4.0 bpm

 REMARKS: Safety meeting, Rigged up broke circulation, mixed 500 lbs class A 1 1/2
5/16 of 1 1/2 cdi 26 2/16 of 1 1/2 cat 38, 4 1/2 gal, displaced with 28.5 bbl water circulating cement
to surface. Shut in at 1000 lbs

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	58	MILEAGE	3.65	211.70
11045	146 SKS	Class A cement	13.50	1971.00
1102	80 lbs	calcium chloride	0.75	60.00
1118B	600 lbs	gel	.20	120.00
1137	50 lbs	cdi 26	7.25	362.50
1146	50 lbs	cat 38	7.70	385.00
0407A	358 58	ton mileage Delivery X 6.8 tons X	1.20	477.60
4154	1	Float shoe 3 1/2 floater type	221.00	221.00
4403	1	3 1/2 Rubber plug	35.00	35.00
RECEIVED				
FEB 07 2011				
KCC WICHITA				
		SALES TAX		844.51
		ESTIMATED TOTAL		4983.31

Revin 3737

AUTHORIZATION

TITLE

DATE 10-14-10

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.