



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1050693

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 # 31160
Name: Phillips Exploration Company L.C.
Address 1: 1601 Sagebrush
Address 2: _____
City: WICHITA State: KS Zip: 67230 + 7010
Contact Person: James B. Phillips
Phone: (316) 636-2256
CONTRACTOR: License # 30141
Name: Summit Drilling Company
Wellsite Geologist: Bill Stout
Purchaser: _____

Designate Type of Completion:

- ☒ New Well ☐ Re-Entry ☐ Workover
- ☐ Oil ☐ WSW ☐ SWD ☐ SLOW
☐ 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 #: _____

6/10/2010 6/16/2010 6/16/2010

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-127-20585-00-00

Spot Description: _____

NE NE SW Sec. 7 Twp. 15 S. R. 8 ☒ East ☐ West

2,310 Feet from ☐ North / ☒ South Line of Section

2,970 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Morris

Lease Name: Schoof Well #: 1-7

Field Name: _____

Producing Formation: na

Elevation: Ground: 1374 Kelly Bushing: 1393

Total Depth: 2750 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 227 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: 400 ppm Fluid volume: 400 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: 6/16/2010



1050693

Operator Name: Phillips Exploration Company L.C. Lease Name: Schoof Well #: 1-7
 Sec. 7 Twp. 15 S. R. 8 ☒ East ☐ West County: Morris

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 checked="" 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
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	B/KC	Datum
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	cherokee	1945
Electric Log Submitted Electronically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	hunton	2148
(If no, Submit Copy)		viola	2323
		simpson	2507
		arbuckle	2622
			-552
			-775
			-930
			-1114
			-1229
			-1354

List All E. Logs Run:

Dual Induction
Compensated Density Neutron Log

CASING RECORD <input type="checkbox"/> New <input checked="" 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	12.25	8.625	23	227	60/40 poz	95	4% gel

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:		METHOD OF COMPLETION:		PRODUCTION INTERVAL:
<input type="checkbox"/> Vented	<input type="checkbox"/> Sold	<input type="checkbox"/> Open Hole	<input type="checkbox"/> Perf.	_____ _____ _____
<input type="checkbox"/> Used on Lease	<input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Dually Comp. (Submit ACO-5)	<input type="checkbox"/> Commingled (Submit ACO-4)	
(If vented, Submit ACO-18.)				



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 # 234776

Invoice Date: 06/18/2010 Terms: 0/30,n/30

Page 1

PHILLIPS EXPLORATION CO LC
1601 SAGEBRUSH
WICHITA KS 67230
(316) 636-2256

SCHOOF 1-7
28826
06-17-10

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	95.00	11.0000	1045.00
1118A	S-5 GEL/ BENTONITE (50#)	325.00	.2000	65.00

Description	Hours	Unit Price	Total
445 P & A NEW WELL	1.00	900.00	900.00
445 EQUIPMENT MILEAGE (ONE WAY)	70.00	3.55	248.50
515 TON MILEAGE DELIVERY	285.60	1.20	342.72

20-8026586

Parts:	1110.00	Freight:	.00	Tax:	69.94	AR	2671.16
Labor:	.00	Misc:	.00	Total:	2671.16		
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

MCALISTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577



LOCATION *Eureka*

FOREMAN KEVIN MCCOY

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

FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
6-17-10	6290	School 1-2		7	15S	8E	Morris	
CUSTOMER Phillips Exploration Co., L.C.				Summit Drilg. Co.				
MAILING ADDRESS 1601 Sagebrush					TRUCK #	DRIVER	TRUCK #	DRIVER
					445	Justin		
					515	Chris		
CITY	STATE	ZIP CODE						
Wichita	Ks	67230						

JOB TYPE <u>P.T.A.</u>	<u>0</u>	HOLE SIZE <u>7 7/8</u>	HOLE DEPTH <u>2750' KB</u>	CASING SIZE & WEIGHT _____
CASING DEPTH _____	DRILL PIPE _____	TUBING _____	OTHER _____	
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____	
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____	

REMARKS: Safety Meeting: Rig up to 4" Drill pipe. Spot Cement Plugs As Following.

35 SKS @ 27/8'

35 SAS @ 250'

25 SKS @ 60' to SURFACE

[illegible]

Flavin 3737

AUTHORIZATION

TITLE Summit Delg. Toolpusher

DATE 6-17-10

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.



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
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PHILLIPS EXPLORATION CO LC
1601 SAGEBRUSH
WICHITA KS 67230
(316) 636-2256

SCHOOOF 1-7
28826
06-17-10

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20-8026586

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Labor:	.00	Misc:	.00	Total:	2671.16		
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Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
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GILLETTE, WY
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LOCATION *Eureka*

FOREMAN KEVIN MCCOY

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

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CUSTOMER Phillips Exploration Co., L.C.				Summit Drilg. Co.				
MAILING ADDRESS 1601 Sagebrush					TRUCK #	DRIVER	TRUCK #	DRIVER
					44S	Justin		
					51S	Chris		
CITY	STATE	ZIP CODE						
Wichita	Ks	67230						

JOB TYPE <u>P. T. A.</u>	<u>0</u>	HOLE SIZE <u>7 7/8</u>	HOLE DEPTH <u>2750' KB</u>	CASING SIZE & WEIGHT _____
CASING DEPTH _____	DRILL PIPE _____	TUBING _____	OTHER _____	
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____	
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____	

REMARKS: Safety Meeting: Rig up to 4" Drill pipe, Spot Cement Plugs As Following.

35 SKS @ 27/8'

35 stars @ 250'

25 SKS @ 60' to SURFACE

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405 N	1	PUMP CHARGE	900.00	900.00
5406	70	MILEAGE	3.55	248.50
1131	95 SKS	60/40 Pozmix Cement	11.00	1045.00
1118 A	325 #	GeL 4%	.20	65.00
5407 A	4.08 TONS	70 miles BUCK TRUCK	1.20	342.72
THANK you			Sub Total	2601.22
6.3%			SALES TAX	69.94
234116			ESTIMATED TOTAL	2671.16

Bayin 3737

AUTHORIZATION

TITLE Summit Drlg. Toolpusher

DATE **6-17-10**

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.



SUPERIOR
Hays,
Kansas

DUAL INDUCTION LOG

Company
Well
Field
County
State

PHILLIPS EXPLORATION CO., LC.
SCHOOT #1-7

MORRIS
KANSAS

Company PHILLIPS EXPLORATION COMPANY, LC
Well SCHOOT #1-7
Field
County MORRIS State KANSAS

Location: API #: 15-127-20585-0000

2310 FSL & 2970' FEL
NE - NE - SW

SEC 7 TWP 15S RGE 8E

Permanent Datum GROUND LEVEL Elevation 1383
Log Measured From KELLY BUSHING 10' A.G.L.
Drilling Measured From KELLY BUSHING

Other Services
CDL/CNL
MEL

Elevation

K.B. 1393
D.F. 1391
G.L. 1383

Date	6-17-10		
Run Number	ONE		
Depth Driller	2750		
Depth Logger	2747		
Bottom Logged Interval	2745		
Top Log Interval	0		
Casing Driller	8 5/8" @ 229		
Casing Logger	227		
Bit Size	7 7/8		
Type Fluid in Hole	CHEMICAL MUD	CHLORIDES 250 PPM	
Density / Viscosity	9.3/42		
pH / Fluid Loss	10.5/9.2		
Source of Sample	FLOWLINE		
Rm @ Meas. Temp	.36 @ 83F		
Rmf @ Meas. Temp	.27 @ 83F		
Rmc @ Meas. Temp	.43 @ 83F		
Source of Rmf / Rmc	MEASURED		
Rm @ BHT	.26 @ 114F		
Time Circulation Stopped	3 HOURS		
Time Logger on Bottom			
Maximum Recorded Temperature	114F		
Equipment Number	680		
Location	HAYS, KANSAS		
Recorded By	JEFF GRONEWEG		
Witnessed By	BILL STOUT		

<<< Fold Here >>>

All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

THANK YOU FOR USING SUPERIOR WELL SERVICES HAYS, KANSAS (785)628-6395
DIRECTIONS
INTERSECTION OF I-70 & EXIT 313 - SOUTH TO MORRIS COUNTY LINE - SOUTH TO RD K
4 MILES WEST - 1/2 MILE NORTH - EAST INTO

Database File: 005146ddn.db
Dataset Pathname: pass3.2
Presentation Format: .dli2
Dataset Creation: Thu Jun 17 05:45:22 2010 by Calc Open-Cased 090629
Charted by: North in East scaled 1:600