



KANSAS CORPORATION COMMISSION 1054721
OIL & GAS CONSERVATION DIVISION

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 # 6168
Name: Scheuneman, Lester
Address 1: 27800 PLEASANT VALLEY RD
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 8443
Contact Person: Lester Scheuneman
Phone: (785) 883-4621
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: NA
Purchaser:

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 #:
1/25/2011 1/26/2011 4/18/2011
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-003-24983-00-00
Spot Description:
NW NE SE NE Sec. 22 Twp. 20 S. R. 20 East West
3,865 Feet from North / South Line of Section
486 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: Banks Well #: 13
Field Name:
Producing Formation: Squirrel
Elevation: Ground: 942 Kelly Bushing: 0
Total Depth: 698 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 40 w/ 5 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 1500 ppm Fluid volume: 80 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: 04/26/2011



1054721

Operator Name: Scheuerman, Lester Lease Name: Banks Well #: 13
 Sec. 22 Twp. 20 S. R. 20 East West County: Anderson

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 <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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Open Hole
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CASING RECORD <input checked="" 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	6.2500	10	40	Portland	5	50/50 POZ
Completion	5.6250	2.8750	8	676	Portland	180	50/50 POZ

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: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 31834

LOCATION Ottawa KS

FOREMAN Fred 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
4/11/11	7632	Banks # 13	NE 22	20	20	AN
CUSTOMER			TRUCK#	DRIVER	TRUCK#	DRIVER
Lester Schumann			506	Fred	Safety	Mike
MAILING ADDRESS			495	Harold	#DB	Orin Ken
27800 Pleasant Valley Rd			388	Arten	ARM	#50 Green
CITY			503	Derick	DM	Chris
Wellsville						
STATE						
KS						
ZIP CODE						
66092						

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 628 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 661' DRILL PIPE Pin @ 156' TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Pkg
 DISPLACEMENT 3.84 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish Circulation. Circulate from pit to condition hole. Mix Pump 200# Premium Gel Flush Mixed App 25 sacks Cement. Casing jacked up 1' up @ collar dropped thru clamp. Washed cement from well thru pit. Client contacted pulling rig to raise casing back up + re clamp. Mix Pump 105. Dks 50% Mix Cement 2 1/2 Gel. Cement to surface. Flush pump + lines + Displace 2 1/2" Rubber Plug to pin. Shut in casing.
Fred Mader
 Note Well drilled + casing ran Jan. 2011

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1 of 2	PUMP CHARGE		975.00
5406	25	MILEAGE		100.00
5402	661	Casing footage		N/C
5407	Minimum	for miles		330.00
5502C	2 hrs	80 BBL Vac Truck		180.00
1124	160 Sks	50/50 Por Mix Cement		1831.00
1158B	503	Premium Gel		100.00
4402	1	2 1/2" Rubber Plug		28.00
		Less 2 1/2" 75.83		
		3665.00		3676.33
		7.8%		156.35
		SALES TAX		156.35
		ESTIMATED TOTAL		3832.68
		DATE		3/5/11

Revin 3737

AUTHORIZATION: Lester Schumann

TITLE _____

DATE 3/5/11

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

