



KANSAS CORPORATION COMMISSION 1055224
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 # 9722
Name: G & J Oil Company, Inc.
Address 1: PO BOX 188
Address 2: _____
City: CANEY State: KS Zip: 67333 + _____
Contact Person: Gene Nunneley
Phone: (620) 252-9700
CONTRACTOR: License # 5989
Name: Finney, Kurt dba Finney Drilling Co.
Wellsite Geologist: Gene Nunneley
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 #: _____
03/18/2011 03/22/2011 03/22/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-125-32042-00-00
Spot Description: _____
NE SW SE SW Sec. 13 Twp. 34 S. R. 14 East West
495 Feet from North / South Line of Section
1815 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Montgomery
Lease Name: H Melander Well #: 11-15
Field Name: _____
Producing Formation: wayside
Elevation: Ground: 871 Kelly Bushing: 702
Total Depth: 698 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 23 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 687
feet depth to: 0 w/ 75 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 0 ppm Fluid volume: 0 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: Doanna Garrison Date: 05/31/2011



1055224

Operator Name: G & J Oil Company, Inc. Lease Name: H Melander Well #: 11-15
 Sec. 13 Twp. 34 S. R. 14 East West County: Montgomery

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray Neutron Completion Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Datum</th> </tr> </thead> <tbody> <tr> <td>Wayside Sand</td> <td>640</td> <td>642</td> </tr> <tr> <td>Core</td> <td>637</td> <td>654</td> </tr> </tbody> </table>	Name	Top	Datum	Wayside Sand	640	642	Core	637	654
Name	Top	Datum								
Wayside Sand	640	642								
Core	637	654								

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	12.2500	7	19	22.55	I	10	Service Company
Production	5.8750	2.8750	6.5	688	OWC	89	Service Company

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 <i>(Amount and Kind of Material Used)</i>	Depth
5	2" DML-RTG	SW	634'-636'
9	2" DML-RTG	SW	638'-642'

TUBING RECORD:	Size: <u>1"</u>	Set At: <u>687</u>	Packer At: <u>none</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>04/20/2011</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____		
Estimated Production Per 24 Hours	Oil Bbls. <u>2</u>	Gas Mcf <u>0</u>	Water Bbls. <u>25</u>	Gas-Oil Ratio <u>02</u> Gravity <u>30</u>

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

#240157

TICKET NUMBER 29692

LOCATION Barksdale

FOREMAN Jason Bell

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
3-24-11	3081	H. Menander 11-15				McM
CUSTOMER <u>Gene Hummel G.S. Oil Co.</u>						
MAILING ADDRESS						
CITY			STATE	ZIP CODE		
TRUCK #		DRIVER		TRUCK #		DRIVER
492		Tim				
551		Jake				

JOB TYPE L.S. HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 687 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.7 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 3.6 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Ran 350s of gel established circulation. Ran 125 lbs thickset. Shut down washed 1500 gal out. Dropped 2 plugs pumped to bottom plug landed and held. Put 200 psi on shut in.
- Cement circulated to surface.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975.00
5406	30	MILEAGE		120.00
5407	1	bulk truck		330.00
5402	687	footage		144.27
1126A	75 sacks	thickset		1372.50
1107A	40 #	Plano		48.80
110A	400 #	Water		176.00
4402	2	2 7/8 Rubber Plugs		56.00
		10% discount if paid in 30 days = 332.67		
		<u>2994.06</u>		
		6.3% SALES TAX		104.16
		ESTIMATED TOTAL		3326.73

Revin 9737 AUTHORIZATION Gene Hummel 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.

4/11/2011

FIELD TICKET

0164195

210467

Customer	G&J	Stage	#1
Customer Acct #	3081	Section	13
Well Name	H. Melander #11-15	TWP	34S
Charge To		RGE	14E
Mailing Address		County	Montgomery
City & State		Formation	Wayside
Zip Code		Perfs	634 - 636 638 - 642 14 holes

Code	Vehicles, Equipment and Mileage	Quantity	Unit	Price per Unit	
5102	2250 HP PUMP	1	PER JOB	3275.00	\$ 3,275.00
5106	BLENDER TRUCK (0-20 BPM)	1	PER JOB	1050.00	\$ 1,050.00
5111	FRAC VAN	1	PER JOB	725.00	\$ 725.00
5116B	IRON TRUCK W/ BOOM	1	PER JOB	650.00	\$ 650.00
0			0	0.00	\$ -
0			0	0.00	\$ -
0			0	0.00	\$ -
0			0	0.00	\$ -
0			0	0.00	\$ -
0			0	0.00	\$ -
0			0	0.00	\$ -
SUBTOTAL					\$ 5,700.00
40% EQUIPMENT DISCOUNT					\$ 2,280.00
EQUIPMENT TOTAL					\$ 3,420.00

Code	Chemical Treatment and Water	Quantity	Unit	Price per Unit	
1231	FRAC GEL (GA-40W)	150.0	POUNDS	5.20	\$ 780.00
1205	BACHSIDE	2.0	GALLONS	30.00	\$ 60.00
1208	BREAKER (LEB-4)	0.5	GALLONS	187.00	\$ 93.50
1244	CLAY STAY (CS-250)(CS-702)	1.0	GALLONS	37.00	\$ 37.00
1219B	STIMFLO (FBA)	1.0	GALLONS	40.00	\$ 40.00
1208c	BREAKER AMMONIUM PERSULFATE	10.0	POUNDS	4.86	\$ 48.60
1275	15% HCL ACID (CHARGE FOR INHIBITOR IN ADDITION)	500.0	GALLONS	1.70	\$ 850.00
1202	ACID INHIBITOR (AI-260)	1.0	GALLONS	46.00	\$ 46.00
			0.0	0.00	\$ -
			0.0	0.00	\$ -
			0.0	0.00	\$ -
			0.0	0.00	\$ -
			0.0	0.00	\$ -
CHEMICAL TOTAL					\$ 1,955.10

Code	Sand	Quantity	Unit	Price per Unit	
2102	12/20 BROWN (bulk)	7,000	POUNDS	\$0.27	\$ 1,880.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
SAND TOTAL					\$ 1,880.00

Code	Water and Chemical Transport	Quantity	Unit	Price per Unit	
5109	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER MILE	\$315.00	\$ 315.00
0		0	0	\$4.00	\$ -
5310A	ACID TRANSPORT	1	HR	\$140.00	\$ 140.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
TRANSPORT TOTAL					\$ 455.00

Code	Frac Valves	Quantity	Unit	Price per Unit	
5604	2 INCH FRAC VALVE	1	PER WELL (3 DAYS)	\$100.00	\$ 100.00
FRAC VALVE TOTAL					\$ 100.00

Code	Miscellaneous Costs	Quantity	Unit	Price per Unit	
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
MISC. TOTAL					\$ -

DISCOUNT (GOOD IF PAID WITHIN 30 DAYS)		40%	EQUIPMENT DISCOUNT(FROM ABOVE)	2,280.00
		20%	MATERIALS DISCOUNT	880.02
			SALES TAX	
DISCOUNTED TOTAL				\$ 6,940.08

CUSTOMER or AGENTS SIGNATURE *H. Melander* COWS FOREMAN *[Signature]*
 DATE 4-11-11

I acknowledge that the payment terms, unless specifically amended in writing on the front of this 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

4/11/2011

TREATMENT REPORT
FRAC AND ACID

Customer	G&J	Stage	#1
Customer Acct #	0	Section	13
Well No.	H. Melander #11-15	TWP	34S
Charge To	0	RGE	14E
Mailing Address	0	County	Montgomery
City & State	0	Formation	Wayside
Zip Code	0	ARRIVED ON LOCATION	DEPARTED

Type of Treatment	
SW	
Chemicals	
FRAC GEL (GA-40W)	
BACHCIDE	
BREAKER (LEB-4)	
CLAY STAY (CS-250)(CS-702)	
STIMFLO (FBA)	
BREAKER AMMONIUM PERSULFATE	
15% HCL ACID (CHARGE FOR INHIBITOR IN ADDITION)	
ACID INHIBITOR (AI-260)	
0	
0	
0	
Well Data	
CASING WEIGHT	
TUBING SIZE	2 7/8 6.5#
TUBING WEIGHT	
TOTAL DEPTH	
PLUG DEPTH	
PACKER DEPTH	
OPEN HOLE	

TRUCK #	DRIVER	TRUCK #	DRIVER
560-T75	Ryan L.		
423	James B.		
474	Cody S.		
499-T115	Roland P.		
550	Mark J.		
Rider 423	Jason R.		
498	Roger S.		
Rider 498	Dusty		
578-ENG	Greg H.		
552-T95	Tom S.		
Parts and Formation			
634 - 636 638 - 642			
14 holes			

Stage	BBL'S Pumped	Proppant PPG	INJ Rate	Sand/Stage	PSI	TIME	PSI
						BREAKDOWN	1080
Breakdown	5		6 - 10		940 - 1070	START PRESS.	0
						END PRESS.	1033
Acid	3		6		1050 - 1251	BALL OFF	
						ROCK SALT	
						ISIP	440
Pad	27		10 - 12		1650 - 1989	5 MIN	392
						10 MIN	
						15 MIN	
12/20 sand	17	0.13	12	90 lbs	1660 - 1770	MIN RATE	2
12/20 sand	13	0.25	12	155 lbs	1540 - 1660	MAX RATE	12
12/20 sand	14	0.50	12	355 lbs	1530 - 1550	DISPLACEMENT	3.7
12/20 sand	21	1.00	12	880 lbs	1430 - 1585		
12/20 sand	10	1.25	12	570 lbs	1320 - 1430		
12/20 sand	10	1.75	12	750 lbs	1250 - 1320		
12/20 sand	52	2.50	12	5339 lbs	1040 - 1260		
Flush	6		12		1033 - 1040		

Remarks
 Spotted 100 gallons of acid
 Pressure tested to 3800 psi, max pressure is 3500 psi

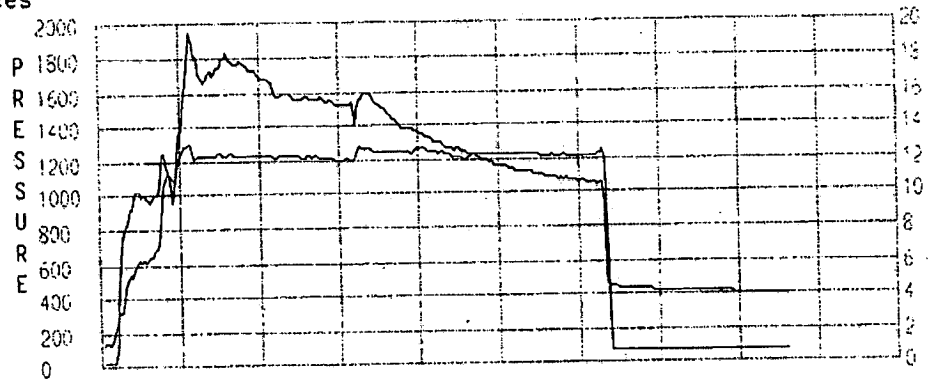
Authorization _____ Title _____ Date _____

LINEAR PLOT

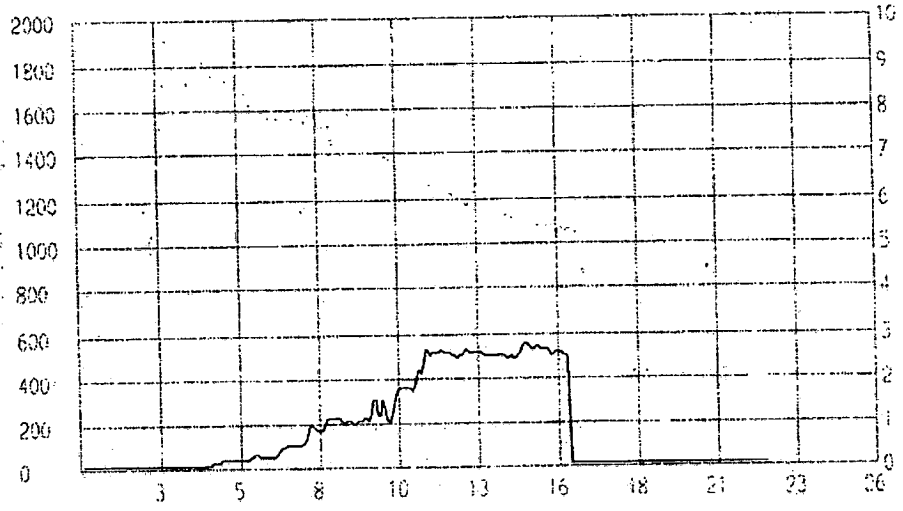
Prepared by: Consolidated Oil Well Services

Company Name: S&S Oil
 Well Name: H. Melander
 Field: 13-145-14E
 Formation: Wayside
 County: MC
 State: Ks
 Job Date: 04/11/81
 Comments: Acid Sand Pac

Fluids: 170 Bbl saltwater 200 Gal 15% acid
 Proppants:
 Average Rate: 12
 Average SIP: 1150
 Tubing:
 Casing: 2 1/8
 Packer:
 Wellbore: 10102303
 Closure Pres: 4000



S L U R R Y - R A T E



S A N D

Pressure (PSI) vs. Time (min)