



KANSAS CORPORATION COMMISSION 1061367  
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 # 34585  
Name: Oil Sources Corp.  
Address 1: 7105 W. 105TH ST  
Address 2:  
City: OVERLAND PARK State: KS Zip: 66212 +  
Contact Person: Lesli Stuteville  
Phone: ( 913 ) 980-8207  
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 #:

08/01/2011 08/03/2011 08/12/2011  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 15-059-25685-00-00

Spot Description:

NW SE SW SW Sec. 17 Twp. 16 S. R. 21 ☒ East ☐ West  
495 Feet from ☐ North / ☒ South Line of Section  
4515 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Franklin

Lease Name: DPC Well #: 8

Field Name:

Producing Formation: Squirrell

Elevation: Ground: 953 Kelly Bushing: 0

Total Depth: 718 Plug Back Total Depth: 678

Amount of Surface Pipe Set and Cemented at: 20 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: 20 w/ 3 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: 08/15/2011



1061367

Operator Name: Oil Sources Corp. Lease Name: DPC Well #: 8  
 Sec. 17 Twp. 16 S. R. 21 ☒ East ☐ West County: Franklin

**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 ☐ Yes ☒ No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☐ Yes ☒ No

Electric Log Submitted Electronically ☐ Yes ☐ No  
 (If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample  
 Name Top Datum  
 open hole

### CASING RECORD ☒ New ☐ 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	20	Portland	3	50/50 POZ
Completion	5.6250	2.8750	8	524.5	Portland	99	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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 32699  
LOCATION Off acre  
FOREMAN Alan Mader

# FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-3-11	5949	DPC #8	SW 17	16	21	Fr
CUSTOMER Oil Sources						
MAILING ADDRESS 7105 W 105th						
CITY Overland Park		STATE KS	ZIP CODE 66212			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			516	Alan M	Safety	Meat
			495	Casey K	CHP	
			370	Arden Mc	ARM	
			548	Cecil P	CHP	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 718 CASING SIZE & WEIGHT 2 7/8  
CASING DEPTH 687 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING yes  
DISPLACEMENT 4 DISPLACEMENT PSI 800 MIX PSI 200 RATE 5 bpm

REMARKS: Held crew meeting, Est established rate  
Mixed & pumped 100# gel to flush hole followed  
by 99 sk 50/50 pot, plus 20% gel. Circulated  
cement. Flushed pump. Pumped plug to  
casing TD. Well held 800 PSI.

TOS Drilling

*Alan Mader*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401		PUMP CHARGE	495	975.00
5406	10 15	MILEAGE	495	60.00
5402	687'	casing footage	495	—
5407	2 min	ton miles	548	165.00
3502L	1 1/2	80 vac	370	135.00
1124	99 sk	50/50 pot		1034.55
118B	266 #	gel		53.20
4402	1	2 1/2 plug		28.00
		Less 5%		
			7.7	87.02
			SALES TAX	87.02
			ESTIMATED TOTAL	2537.78

Revin 3737

AUTHORIZATION *[Signature]*

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.

Franklin County, KS  
Well: DPC # 8  
Lease Owner: Oil Source

Town Oilfield Service, Inc.  
(913) 837-8400

Commenced Spudding:  
8/1/2011

## WELL LOG

[illegible]