



KANSAS CORPORATION COMMISSION 1063701  
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 # 6142  
Name: Town Oil Company Inc.  
Address 1: 16205 W 287TH ST  
Address 2: \_\_\_\_\_  
City: PAOLA State: KS Zip: 66071 + 8482  
Contact Person: Lester Town  
Phone: ( 913 ) 294-2125  
CONTRACTOR: License # 6142  
Name: Town Oil Company Inc.  
Wellsite Geologist: NA  
Purchaser: \_\_\_\_\_

API No. 15 - 15-059-25587-00-00  
Spot Description: \_\_\_\_\_  
N2\_N2\_SE\_NE Sec. 1 Twp. 17 S. R. 20  East  West  
3670 Feet from  North /  South Line of Section  
660 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Franklin  
Lease Name: Killough Well #: 2-W  
Field Name: Paola-Rantoul  
Producing Formation: Squirrel  
Elevation: Ground: 968 Kelly Bushing: 0  
Total Depth: 742 Plug Back Total Depth: 742  
Amount of Surface Pipe Set and Cemented at: 21 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: 21 w/ 3 sx cmt.

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 #: \_\_\_\_\_  
8/16/2011 8/19/2011 8/21/2011  
Spud Date or Date Reached TD Completion Date or Recompletion Date

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: 09/22/2011



1063701

Operator Name: Town Oil Company Inc. Lease Name: Killough Well #: 2-W  
 Sec. 1 Twp. 17 S. R. 20  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 <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 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 type="checkbox"/> Sample  Name Top Datum Gamma Ray
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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	21	Portland	3	50/50 POZ
Completion	5.6250	2.8750	8	735	Portland	101	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 <i>(Amount and Kind of Material Used)</i>	Depth
2	688.0-694.0	Aicd 500 gal. 7.5% ACL	

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 Bbbs.	Gas Mcf	Water Bbbs. Gas-Oil Ratio Gravity

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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Franklin County, KS  
Well: Killough 2-W  
Lease Owner: TOC

Town Oil Company, Inc.  
(913) 294-2125

Commenced Spudding:  
8/16/2011

WELL LOG

Thickness of Strata	Formation	Total Depth
4	Soil	4
7	Lime	11
8	Shale	19
39	Lime	58
14	Shale	72
40	Lime	112
63	Shale	175
21	Lime	196
19	Shale	215
11	HS	226
7	Lime	233
21	Shale	254
9	Lime	263
23	Shale	286
25	Lime	311
9	Shale	320
22	Lime	342
5	Shale	347
4	Lime	351
2	Shale	353
5	Lime	358
117	Shale	475
12	Lime	487
71	Shale	558
4	Lime	562
14	Shale	576
4	Lime	580
9	Shale	589
8	Lime	597
5	Shale	602
8	Lime	610
3	Shale	613
5	Sand	618
9	Sand	627
43	Sandy Shale	670
4	Sandy Shale	674
12	Shale	686
6	Sand	692
50	Sandy Shale	742-TD





**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 32718  
LOCATION Ottawa, KS  
FOREMAN Casey Kennedy

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
8/19/11	7823	Killough # 2-W	NW 1	17	20	FR
CUSTOMER Town Oil Company			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 10205 W. 287 Street			389	Casken	ck	
CITY Paola			495	HarBec	HB	
STATE KS			558	DorMes	DM	
ZIP CODE 66071						

JOB TYPE longstring HOLE SIZE 5 5/8" HOLE DEPTH 742' CASING SIZE & WEIGHT 5 3/8"  
 CASING DEPTH 735' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER pin 730'  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2" rubber plug  
 DISPLACEMENT 2.83 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 100# Premium Gel followed by 10 bbls fresh water, mixed & pumped 101 sks 50/50 Pozmix cement w/ 2% Gel per sk, cement to surface, pushed pump clean, displaced 2" rubber plug to pin w/ 2.83 bbls fresh water, pressured to 800 PSI, well held pressure for 30 minute MIT, shut in casing.

*Handwritten signature/initials*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE cement pump	495	975.00
5406	10	MILEAGE pump truck	495	4950.00
5402	735'	casing footage		
5407	minimum	ton mileage	558	330.00
1124	101 sks	50/50 Pozmix cement		1055.45
1188	170 #	Premium Gel		34.00
			7.8%	SALES TAX
				ESTIMATED
				TOTAL
				2519.43

*Handwritten note: # 2H/3659*

Rev'n 3737

AUTHORIZATION Winton Jones 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.