



KANSAS CORPORATION COMMISSION 1062972
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 # 9313
Name: Lorenz, James D.
Address 1: 543A 22000 RD
Address 2: _____
City: CHERRYVALE State: KS Zip: 67335 + _____
Contact Person: James D. Lorenz
Phone: (620) 423-9360
CONTRACTOR: License # 33749
Name: Kepley Well Service, LLC
Wellsite Geologist: n/a
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 #: _____
04/29/2011 05/02/2011 05/16/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-037-22175-00-00
Spot Description: _____
W2_W2_NW_SE Sec. 18 Twp. 30 S. R. 22 East West
1980 Feet from North / South Line of Section
2630 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Crawford
Lease Name: Buzard Well #: INJ # 1
Field Name: McCune
Producing Formation: Bartlesville
Elevation: Ground: 911 Kelly Bushing: 916
Total Depth: 364 Plug Back Total Depth: _____
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: 350
feet depth to: 0 w/ 79 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: Deanna Garbar Date: 09/09/2011



1062972

Operator Name: Lorenz, James D. Lease Name: Buzard Well #: INJ # 1
 Sec. 18 Twp. 30 S. R. 22 East West County: Crawford

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 DRILLER'S LOG 0 364
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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	12.2500	8.6260	18	20	Portland	4	
Production	6.7500	2.3750	4.600	350	OWC	79	

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	2"DML-RTG	AWAITING ACIDIZING	312-318
2	2"DML-RTG	AWAITING ACIDIZING	298-302
2	2"DML-RTG	AWAITING ACIDIZING	288-292

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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
	00	0	0	0	0

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
5/16/2011	45473

Cement Treatment Report

Lorotta Oil, LLC
543A 22000 Road
Cherryvale, KS 67335

(x) Landed Plug on Bottom at 500 PSI
 () Shut in Pressure
 (x) Good Cement Returns
 () Topped off well with _____ sacks
 (x) Set Float Shoe

TYPE OF TREATMENT: Production Casing
 HOLE SIZE: 6 3/4"
 TOTAL DEPTH: 360

Well Name	Terms	Due Date		
	Net 15 days	5/16/2011		
Service or Product		Qty	Per Foot Pricing/Unit Pricing	Amount
Run and cement 2 3/8"		350	4.00	1,400.00
Sales Tax			7.30%	0.00

Buzzard Injection
Crawford County
Section:
Township:
Range:

NO 1

Hooked onto 2 3/8" casing. Established circulation with 2 barrels of water, 1 GEL, 1 METSO, COTTONSEED ahead, blended 79 sacks of OWC, dropped rubber plug, and pumped 1.9 barrels of water

Total	\$1,400.00
Payments/Credits	\$0.00
Balance Due	\$1,400.00

*pd at #1032
5/31/11
\$2800.*

Well Refined Drilling Company, Inc.

4230 Douglas Road - Thayer, KS 66776

Contractor License # 33072

Office - 620-839-5581; Jeff Pocket - 620-432-6170; Fax - 620-839-5582

HAVE RIG
Rig # 2
WILL DIG!

Rig #:	2	License # 9313
API #:	15-037-22175	
Operator:	James D. Lorenz	
Address:	543A 22000 Road	
	Cherryvale, KS 67335 - 8515	

S18	T30S	R22E
Location:	W2,W2, NW, SE	
County	Crawford - KS	

				Gas Tests			
Well #:	INJ # 1	Lease Name:	Buzard	Depth	Oz.	Orifice	flow - MCF
Location:	1980	FSL		105		No Flow	
	2630	FEL		130		No Flow	
Spud Date:		4/29/2011		205		Trace	
Date Completed:		5/2/2011	TD: 364	230	1	3/8"	3.56
Geologist:				255		Gas Check Same	
Driller:		Josiah Kephart		280		Gas Check Same	
Casing Record		Surface	Production	305		Trace	
Hole Size		12 1/4"	6 3/4"	330		Trace	
Casing Size		8 5/8"		364		Trace	
Weight							
Setting Depth		20' 6"					
Cement Type		Portland					
Sacks		4					
Feet of Casing							

11LD-050211-R2-027-Buzard INJ # 1 - James D. Lorenz

Well Log

Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	2	overburden	199	215	shale	317	363	shale
2	6	lime	215	217	blk shale	363	364	coal
6	32	shale	217	218	coal	364		Total Depth
32	37	sand	218	238	shale			
37	61	shale	238	239	coal	364		shanked bit
61	62	coal	239	255	shale			
62	75	shale	255	256	coal			
75	93	lime	256	268	shale			
93	99	shale	268	271	sandy shale			
99	103	lime	271	275	shale			
103	108	sandy shale	275	288	sand			
108	110	shale			faint odor			
110	112	blk shale	288	299	oil sand			
112	113	coal			odor			
113	195	shale			bleeding			
195	196	blk shale	299	306	sandy shale			
196	198	shale	306	314	oil sand			
198	199	coal	314	317	sandy shale			