



KANSAS CORPORATION COMMISSION 1066971
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 # 33551
Name: S & K Oil Production, Inc.
Address 1: PO BOX 184
Address 2: _____
City: BLUE MOUND State: KS Zip: 66010 + 0184
Contact Person: Steve Jackson
Phone: (913) 756-2622
CONTRACTOR: License # 31519
Name: Jackson, Leland dba Lone Jack Oil Co.
Wellsite Geologist: 0
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 #: _____

10/20/2011	10/22/2011	10/22/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-011-23867-00-00
Spot Description: _____
SW NW SE SE Sec. 17 Twp. 24 S. R. 22 East West
825 Feet from North / South Line of Section
1155 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Blythe Well #: SK 2
Field Name: _____
Producing Formation: Bartlesville
Elevation: Ground: 1026 Kelly Bushing: 0
Total Depth: 618 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: 0
feet depth to: 20 w/ 5 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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: 11/08/2011



1066971

Operator Name: S & K Oil Production, Inc. Lease Name: Blythe Well #: SK 2
 Sec. 17 Twp. 24 S. R. 22 East West County: Bourbon

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 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Bartlesville</td> <td>604</td> <td>614</td> </tr> </table>	Name	Top	Datum	Bartlesville	604	614
Name	Top	Datum					
Bartlesville	604	614					

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	9.8750	6.2500	6	20	One	5	None
Casing	5.6250	2.8750	6	603	One	70	None

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

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 Bbls.	Gas Mcf	Water Bbls. 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 checked="" 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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Lone Jack Oil Company
Blue Mound, KS

1-913-756-2307 1-620-363-0492

Lease: Blythe Operator: S & K Oil API # 15-011-23867-00-00
 Contractor: Lone Jack Oil Company Date Started: 10/20/11 Date Completed: 10/22/11
 Total Depth: 618 feet Well # SK2 Blythe Hole Size: 5 5/8
 Surface Pipe: 20' 6 1/4 Surface Bit: 9 7/8 Sacks of Cement: 5
 Depth of Seat Nipple: _____ Rag Packer At: _____
 Length and Size of Casing: 603' - 2 7/8 Sacks of Cement: 70
 Legal Description: SW NW SE SE Sec: 17 Twp: 24S Range: 22E County: Bourbon

Thickness	Depth	Type of Formation	Core Thickness	Depth	Time
3	3	Top Soil			
2	5	Lime			
5	10	Clay			
19	29	Lime			
4	33	Shale			
4	37	Lime			
6	43	Shale			
9	52	Lime			
8	60	Shale			
3	63	Lime			
10	73	Shale			
14	87	Lime			
2	89	Shale			
3	92	Lime			
3	95	Shale			
3	98	Lime			
4	102	Shale			
4	106	Lime			
113	219	Shale			
21	240	Lime			
72	312	Shale			
20	332	Lime			
2	334	Shale			
4	338	Lime			
44	382	Shale			
3	385	Lime			
3	388	Shale			
1	398	Lime			
6	404	Shale			
6	410	Lime			
39	449	Shale			
2	451	Lime			
53	604	Shale			
4	608	Oil Sand (Shaley)			
6	614	Oil Sand (Good Bleed)			
2	616	Shaley Sand			
2	618	Shale			
	618	TD			