



KANSAS CORPORATION COMMISSION 1064842
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 # 5786
Name: McGown Drilling, Inc.
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 #:

09/10/2011 09/11/2011 10/04/2011

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-059-25719-00-00

Spot Description:

NW NW NE NE Sec. 5 Twp. 16 S. R. 21 ☒ East ☐ West
280 Feet from ☒ North / ☐ South Line of Section
1300 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☒ NE ☐ NW ☐ SE ☐ SW

County: Franklin

Lease Name: Two Bros Well #: 2

Field Name:

Producing Formation: Squirrel

Elevation: Ground: 1015 Kelly Bushing: 0

Total Depth: 763 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: 23 w/ 4 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: 10/17/2011



1064842

Operator Name: Oil Sources Corp. Lease Name: Two Bros Well #: 2
 Sec. 5 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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey ☐ Yes ☒ No Cores Taken ☐ Yes ☒ No Electric Log Run ☒ Yes ☐ No Electric Log Submitted Electronically ☒ Yes ☐ No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron/ CCL	☐ Log Formation (Top), Depth and Datum ☐ Sample Name Top Datum Gamma Ray
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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	7	10	20	Portland	4	50/50 POZ
Completion	5.6250	2.8750	8	524.5	Portland	106	50/50 POZ

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: _____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
	-			
	-			

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
3	710.0-726.5	2" DML RTG	16.5

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

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> ☐ Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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McGown Drilling, Inc.

Mound City, Kansas

Operator:

Oil Sources Corporation
7105 W 105th Street
Overland Park, KS 66212

Well: Two Brothers #2

S-T-R S5-T16-R21

County: Franklin Co, KS

API:

Spud Date: 9/10/2011 **Surface Bit Size:** 9.875"

Surface Casing: 7" **Drill Bit Size:** 5.625"

Surface Length: 23'

Surface Cement: 4 sx

Surface Call: Chris M.

Driller's Log

Top	Bottom	Formation	Comments
0	3	Soil	
3	39	Clay	
39	43	Shale (muddy)	
43	48	Lime	
48	51	Shale	
51	67	Lime	
67	74	Shale	
74	85	Lime	
85	91	Sand	
91	106	Lime	
106	164	Shale (sandy)	
164	174	Lime	
174	185	Sand & Shale	
185	249	Shale	
249	252	Lime	
252	253	Shale	
253	267	Lime	
267	269	Shale	
269	272	Lime	
272	298	Sandy Shale	
298	304	Lime	
304	363	Shale	
363	385	Lime	

Office: 913-795-2259

Chris' Cell: 620-224-7406

mcgowndrilling@gmail.com

PO Box K

Mound City, KS 66056

385	391	Shale	
391	416	Lime	
416	421	Shale	
421	425	Lime	
425	427	Shale	
427	433	Lime	
433	552	Shale	
552	560	Sand	
560	564	Sandy Shale	
564	605	Shale	
605	611	Lime	
611	658	Shale	
658	660	Lime	
660	673	Shale	
673	675	Lime	
675	678	Shale	
678	679	Lime	
679	703	Shale	
703	710	Light mucky shale	
710	712	Shaley sand	clean - gas?
			Fair saturation bleed, better
			after 715
712	727	Oil sand	
727	763	Sandy Shale	
	763	TD	

Coring

Core Run

Footage

Recovery

Long String:

754.75'

2 7/8 from Buckeye

Long String

Cement:

Long String and

Cement Call:



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 3055
LOCATION Ottawa KS
FOREMAN Fred Maden

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/13/11	5949	Twohros #2	NW 5	16	21	FR
CUSTOMER <u>Oil Sources Corp</u>			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS <u>7105 W 105th</u>			<u>506 FREMAD Safety Mktg</u>			
CITY <u>Overland Park</u>			<u>365 KENHAM KH</u>			
STATE <u>KS</u>			<u>370 ARLMCO AOM</u>			
ZIP CODE <u>66212</u>			<u>548 GARMOD GDN</u>			
JOB TYPE <u>Logging</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>962'</u>	CASING SIZE & WEIGHT <u>2 3/4 RUF</u>			
CASING DEPTH <u>7520</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>2 1/2 Plus</u>			
DISPLACEMENT <u>4.36</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>4 BPM</u>			
REMARKS: <u>Establish pump rate Mix Pump 100# Premium Gel Flush</u>						
<u>Mix Pump SKS 50/50 for Mix Cement 2 3/4 Casing Cement</u>						
<u>to Surface Flush pump & lines clean. Displace 2 1/2 Rubber</u>						
<u>plug to casing TD w/ 4.36 BBL Fresh Water Pressure to 750</u>						
<u>PSI. Release pressure to set float valve. Shut in casing</u>						

McGown Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	365.00	975.00
5406	-0-	MILEAGE Truck on lease	365	N/C
5402	1/2 minimum	Ten Miles		165.00
5402	0.752	Casing footage		N/C
5502C	1 1/2 hrs	80 BBL Vac Truck		135.00
1184	106 SKS	50/50 for Mix Cement		1107.20
1180	275*	Premium Gel		55.60
4402	1	2 1/2" Rubber Plug		28.00
Less 5% Discount			-127.96	
Total			2431.26	
2442.77			7.8%	
SALES TAX				92.93
ESTIMATED TOTAL				2559.22

Rev 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