



KANSAS CORPORATION COMMISSION 1068542  
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 # 34586  
Name: ST Petroleum, Inc.  
Address 1: 18800 Sunflower Rd  
Address 2: \_\_\_\_\_  
City: Edgerton State: KS Zip: 66021 + \_\_\_\_\_  
Contact Person: Rick Singleton  
Phone: (913) 638-6398  
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 #: \_\_\_\_\_

10/11/2011	10/12/2011	11/21/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-091-23592-00-00  
Spot Description: \_\_\_\_\_  
W2 NW SE NE Sec. 29 Twp. 14 S. R. 22  East  West  
3630 Feet from  North /  South Line of Section  
1000 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Johnson  
Lease Name: Thomas A Well #: 17  
Field Name: Gardner South  
Producing Formation: Bartlesville  
Elevation: Ground: 1027 Kelly Bushing: 0  
Total Depth: 938 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/ 3 sx cmt.

**Drilling Fluid Management Plan**

(Date 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 Gantzer Date: 11/22/2011



1068542

Operator Name: ST Petroleum, Inc. Lease Name: Thomas A Well #: 17  
 Sec. 29 Twp. 14 S. R. 22  East  West County: Johnson

**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:  GammaRay/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum GammaRay
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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	7	10	20	Portland	3	50/50 POZ
Completion	5.6250	2.8750	8	924	Portland	121	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
3	868.0-878.0	2" DML RTG	10

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 Bbts.	Gas Mcf	Water Bbts. 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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**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 32935

LOCATION Ox 2 gwg

FOREMAN Alan Maden

Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8876

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-12-11	7532	Thomas A 17	NE 29	14	20	SD
CUSTOMER ST Petroleum			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 18800 S Sunflower			516 Alan M Safety meet			
CITY STATE ZIP CODE Edge ton # KS			495 Harold B HSB			
			305/1106 Casey K ck			
			548 Keith D KD			

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 938 CASING SIZE & WEIGHT 2 7/8  
 CASING DEPTH 928 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER ballie 917  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT In CASING yes  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI 800 MIX PSI 200 RATE 5 bpm

REMARKS: Held crew meeting. Established rate. Mixed & pumped 100# gel to flush hole followed by 121sk 50L 50 po2 plus 2% gel & 1/2 flo seal per sack. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float closed valve.

SDS, WRS

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975.00
5406	30	MILEAGE		120.00
5407		casing footage		
5407	min	ten miles		330.00
551C	2	trans port T-106		234.00
1124	12 13K	50/50 po2		1264.45
118B	303#	gel		60.60
1107	61#	fl-seal		135.42
4402	1	2 1/2 plug		28.00
				SALES TAX 112.01
				ESTIMATED TOTAL 3249.48

245065

SCANNED

Rev'n 3/77

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 for

Johnson County, KS  
Well: Thomas A-17  
Lease Owner: ST Petroleum

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

Commenced Spudding:  
10/11/2011

WELL LOG

Thickness of Strata	Formation	Total Depth
0-20	Soil-Clay	20
19	Shale	39
3	Lime	42
15	Shale	57
25	Lime	82
9	Shale	91
8	Lime	99
4	Shale	103
1	Lime	104
3	Shale	107
19	Lime	126
16	Shale	142
20	Lime	162
8	Shale	170
54	Lime	224
21	Shale	245
9	Lime	254
17	Shale	271
6	Lime	277
7	Shale	284
7	Lime	291
34	Shale	325
1	Lime	326
10	Shale	336
18	Lime	354
5	Shale	359
4	Lime	361
11	Shale	372
1	Lime	373
3	Shale	376
17	Lime	393
4	Shale	397
4	Lime	401
4	Shale	405
6	Lime	411
175	Shale	586
4	Lime	590
2	Shale	592
2	Lime	594
5	Shale	599

