



KANSAS CORPORATION COMMISSION 1068711
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 #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
10/31/2011	11/01/2011	11/22/2011

API No. 15 - 15-091-23612-00-00

Spot Description: _____
SW NE NW NE Sec. 29 Twp. 14 S. R. 22 East West
4730 Feet from North / South Line of Section
1825 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 #: I-33

Field Name: Gardner South

Producing Formation: Bartlesville

Elevation: Ground: 1040 Kelly Bushing: 0

Total Depth: 938 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 22 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: 22 w/ 3 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: Deanne Garcia Date: 11/23/2011



1068711

Operator Name: ST Petroleum, Inc. Lease Name: Thomas A. Well #: I-33
 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	22	Portland	3	50/50 POZ
Completion	5.6250	2.8750	8	915	Portland	136	50/50 POZ

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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	870.0-880.0	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 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 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 35044
LOCATION Oklahoma KS
FOREMAN Fred Maden

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
11/1/11	7532	Thomas A # I 33	NE 29	14	22	JO

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
S T Petroleum	506	FREMOO	Safety	Willy
	495	HAR BEC	NAB	
	370	GARMOO	GM	
	503	KEICAR	KC	

MAILING ADDRESS	CITY	STATE	ZIP CODE
18800 Sunflower Rd	Edgerton	KS	66021

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 938 CASING SIZE & WEIGHT 2 3/8 EUE
 CASING DEPTH 915.0 DRILL PIPE Baffle TUBING 905 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 3/8 Plug 110'
 DISPLACEMENT 5.26 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5BPM

REMARKS: Establish pump rate. Mix & Pump 1/2 Gal ESA 41 + 1/2 Gal HE-100
 Polymer Flush. Circulate from pit to condition hole.
 Mix & Pump 136 sks 50/50 Por Mix Cement 29 Gal 1/4" Flo Seal / sk.
 Cement to Surface. Flush pump & lines clean. Displace 2 3/8"
 Rubber plug to baffle w/ 5.26 BBL Fresh water. Pressure
 to 800 PSI. Hold pressure for 30 min MIT. Release
 pressure to set float valve. Shut in casing.

TOS Daily (JTD) Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	975.00
5406	30 mi	MILEAGE	495	120.00
5402	9.15	Casino footage		N/C
5407	Minimum	Ton Miles	503	330.00
5502C	2 hrs	80 BBL Vac Truck	370	180.00
1124	136	50/50 Por Mix Cement		1421.20
1118B	329#	Premium Gel		65.00
1107	34#	Flo Seal		25.48
4402	1	2 3/8 Rubber Plug		28.00
1173	1/2 Gal	ESA 41		20.30
1407	1/2 Gal	HE-100 Polymer		23.65
			7525.8	
			SALES TAX	122.89
			ESTIMATED TOTAL	3362.30

Ravin 3737

AUTHORIZATION Jeff Pover 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 to

Johnson County, KS

Town Oilfield Service, Inc.

Commenced Spudding:

Well: Thomas A I-33

(913) 837-8400

10/31/2011

Lease Owner: ST Petroleum

WELL LOG

Thickness of Strata	Formation	Total Depth
0-15	Soil/Clay	15
49	Shale	64
1	Lime	65
2	Shale	67
22	Lime	89
9	Shale	98
9	Lime	107
7	Shale	114
18	Lime	132
18	Shale	150
20	Lime	170
6	Shale	176
54	Lime	230
22	Shale	252
9	Lime	261
17	Shale	278
8	Lime	286
7	Shale	293
10	Lime	303
38	Shale	341
28	Lime	369
5	Shale	374
22	Lime	396
5	Shale	401
4	Lime	405
5	Shale	410
5	Lime	415
43	Shale	458
7	Sand	465
125	Shale	590
6	Lime	596
150	Shale	746
10	Sand	756
112	Shale	868
11	Sand	879
9	Sandy Shale	888
50	Shale	938-TD