



KANSAS CORPORATION COMMISSION 1069849
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 # 31173
Name: Massey, Gary R.
Address 1: 1085 180TH ST
Address 2: _____
City: EUREKA State: KS Zip: 67045 + 4227
Contact Person: Gary R. Massey
Phone: (620) 583-5747
CONTRACTOR: License # 33900
Name: Lels, Steven A.
Wellsite Geologist: n/a
Purchaser: n/a

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 #: _____

<u>09/27/2011</u>	<u>09/28/2011</u>	<u>09/28/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-205-27979-00-00

Spot Description: _____

NW SE SW SE Sec. 13 Twp. 28 S. R. 15 East West
521 Feet from North / South Line of Section
1684 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Wilson

Lease Name: MORSE Well #: 12

Field Name: Benedict

Producing Formation: Bartlesville

Elevation: Ground: 841 Kelly Bushing: 841

Total Depth: 1003 Plug Back Total Depth: 999

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: 999 w/ 110 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 Garrico Date: 12/09/2011



1069849

Operator Name: Massey, Gary R. Lease Name: MORSE Well #: 12
 Sec. 13 Twp. 28 S. R. 15 East West County: Wilson

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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>free oil</td> <td>965</td> <td></td> </tr> <tr> <td>sand</td> <td>969</td> <td></td> </tr> <tr> <td>shale</td> <td>1003</td> <td></td> </tr> </table>	Name	Top	Datum	free oil	965		sand	969		shale	1003	
Name	Top	Datum											
free oil	965												
sand	969												
shale	1003												

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	9.875	7	14	20	Oil Well Cement	110	
production	5.625	2.875	14	999		110	

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

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

ENTERED

TICKET NUMBER 33203

LOCATION Euickra

FOREMAN Rick Ledford

PO Box 504, Chanute, KS 66720
620-431-8210 or 800-467-8876

FIELD TICKET & TREATMENT REPORT

CEMENT

API# 15-205-27779

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-28-11	5405	Morse #12	13	29S	15E	Wilson
CUSTOMER <u>Gary Massey - PDZ Oil</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>1085 180th St.</u>			<u>520</u>	<u>Allen B.</u>		
CITY <u>Euickra</u>	STATE <u>KS</u>	ZIP CODE <u>67095</u>	<u>479</u>	<u>Jim</u>		

JOB TYPE 6/5 O HOLE SIZE 5 7/8" HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH 999' DRILL PIPE _____ TUBING 2 7/8" OTHER _____
 SLURRY WEIGHT 136# SLURRY VOL 28 Bbl WATER gal/hr 2.0 CEMENT LEFT IN CASING 0'
 DISPLACEMENT 5.2 BN DISPLACEMENT PSI 600 MIN PSI 100 Pump plug RATE _____

REMARKS: Safety meeting. Rig up to 2 7/8" tubing. Break circulation w/ 4 Bbl fresh water. Pump 4 sec get flush, brought gel to surface + 1 pit water. Mixed 110 sec OWC cement w/ 1/2" phenoxal/sk @ 13.0#/gal. without pump + 1 sec. Shut down, release latch down plug. Displace w/ 5.2 Bbl fresh water. Final pump pressure 600 PSI. Pump plug to 100 PSI. wait 2 minutes, release pressure, float + plug held. Closed well in @ 0 PSI. Good cement returns to surface = 5 Bbl slurry to pit. Job complete. Rig down.

Note: Ran wireline, tagged float shoe @ 999'

"Thanks Gary"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	20	MILEAGE	4.00	80.00
1126	110 sec	OWC cement	17.90	1969.00
1107A	55 #	1/2" phenoxal/sk	1.22	67.10
1128	200"	get flush	.20	40.00
5407	5.2	ton mileage bulk oil	no/c	330.00
4152	1	2 7/8" float shoe	187.00	187.00
<u>60% DISCOUNT</u> <u>2197.417</u> <u>6330.15</u>			Subtotal	3608.10
			SALES TAX	140.06
			ESTIMATED TOTAL	3748.16

AUTHORIZATION

[Signature]

OWNER

TITLE OWNER

DATE 9-28-11

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 form.

Lease Name: Morse	Spud Date: 8/27/2011	Surface Pipe Size: 7"	Depth: 20'	TD: 1003
Operator: Gary Massey	Well # 12	Bit Diameter: 6 7/8"		
Footage taken	Sample type			
0_4	soil			
4_14	clay			
14_16	sand			
16_43	shale			
43_84	lime			
84_152	shale			
152_175	lime			
175_205	shale			
205_215	lime			
215_238	shale			
238_241	lime			
241_257	shale			
257_389	lime			
389_403	shale			
403_447	lime			
447_452	shale			
452_475	lime			
475_555	shale			
555_585	lime			
585_582	shale			
582_584	lime			
584_656	shale			
656_659	lime			
659_670	shale			
670_673	lime			
673_678	shale			
678_694	lime			
694_699	shale			
699_701	lime			
701_710	shale			
710_713	lime			
713_731	shale			
731_746	lime			
746_753	shale			
753_759	lime			
759_772	shale			
772_775	lime			
775_828	shale			
828_829	lime			
829_844	shale			
844_848	lime			
848_835	shale			
835_838	shale/sand			
838_841	sand/gray mostly			
841_845	broken sand/some oil			
845_954	brown sand/very little oil			
954_965	free oil			
965_969	badly broken/ sand slight show			
969_1003	shale			
	1003 TD			