

**ORIGINAL**  
**KANSAS CORPORATION COMMISSION**  
**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 # 30252  
 Name: patteson oil  
 Address 1: p. o. box 177  
 Address 2: 1343 dove  
 City: moline. State: ks. Zip: 67353 + 0177  
 Contact Person: TOM PATTESON  
 Phone: (620) 647-3203  
 CONTRACTOR: License # 32701  
 Name: C. & G. DRILLING INC.  
 Wellsite Geologist: JOE BAKER  
 Purchaser: PLAINS

API No. 15 - 019-27060-00-00  
 Spot Description: \_\_\_\_\_  
NE SE SW Sec. 14 Twp. 32 S. R. 10  East  West  
800 Feet from  North /  South Line of Section  
2,510 Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: CHAUTAUQUA  
 Lease Name: SHAFFER-B Well #: 14  
 Field Name: LANDON-FLOYD  
 Producing Formation: MISSISSIPPI

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.): \_\_\_\_\_

Elevation: Ground: 1076 Kelly Bushing: 1082  
 Total Depth: 2011 Plug Back Total Depth: 0  
 Amount of Surface Pipe Set and Cemented at: 40 Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set: \_\_\_\_\_ Feet  
 If Alternate II completion, cement circulated from: BOTTOM 2014  
 feet depth to: TOP w/ 300 sx cmt.

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>09-02-11</u>	<u>09-08-11</u>	<u>09-09-11</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

**Drilling Fluid Management Plan**  
 (Data must be collected from the Reserve Pit)  
 Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls  
 Dewatering method used: PUT ON ROAD  
 Location of fluid disposal if hauled offsite: \_\_\_\_\_  
 Operator Name: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
 County: \_\_\_\_\_ Permit #: \_\_\_\_\_

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**NOV 08 2011**

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2076, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. One copy of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

**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.

Signature: Tom Patteson  
 Title: Operator Date: 10-03-11

**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: Dlg Date: 12/20/11

**KCC WICHITA**

Operator Name: patteson oil Lease Name: SHAFFER-B Well #: 14

Sec. 14 Twp. 32 S. R. 10  East  West County: CHAUTAUQUA

**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 checked="" type="checkbox"/> Yes <input 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: <b>GAMMA-RAY-NEUTRON CEMENT-BOND</b>	<input checked="" 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>PAWNEE</td> <td>1595</td> <td>-520</td> </tr> <tr> <td>FT. SCOTT</td> <td>1643</td> <td>-568</td> </tr> <tr> <td>CHEROKEE</td> <td>1684</td> <td>-611</td> </tr> <tr> <td>MISSISSIPPI</td> <td>1964</td> <td>-899</td> </tr> </table>	Name	Top	Datum	PAWNEE	1595	-520	FT. SCOTT	1643	-568	CHEROKEE	1684	-611	MISSISSIPPI	1964	-899
Name	Top	Datum														
PAWNEE	1595	-520														
FT. SCOTT	1643	-568														
CHEROKEE	1684	-611														
MISSISSIPPI	1964	-899														

CASING RECORD <input 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	10"	8 5/8	10LB.	40'	CLASS A	35	CALCIUM 65
PRODUCTION	6 7/8	4 1/2	11LB.	2010	60/40POZ	300	S-5 GEL

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	1971-1978	15% HCl 1800 GAL	1978
2	1984-1990	15% HCl 1800 GAL	1990

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KCC WICHITA

TUBING RECORD:	Size: <u>2 3/8</u>	Set At: <u>2009</u>	Packer At: <u>NONE</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. <u>10/05/11</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) _____				
Estimated Production Per 24 Hours	Oil Bbls. <u>2</u>	Gas Mcf <u>0</u>	Water Bbls. <u>100</u>	Gas-Oil Ratio <u>2%</u>	Gravity <u>30</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" 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: <u>1971-1978</u> <u>1984-1990</u>
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**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 244085

Invoice Date: 09/13/2011 Terms: 0/0/30,n/30

Page 1

PATTESON OIL  
TOM PATTESON  
1343 DOVE, P.O. BOX 177  
MOLINE KS 67353  
(620) 647-3203

SHAFFER B #14  
31526  
14-32S-10E  
09-08-11  
KS

*Paid 9/15/11  
ck # 3838  
\$10,039.31  
Sharon*

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	300.00	11.9500	3585.00
1118	PREMIUM GEL / BENTONITE	2065.00	.2000	413.00
1107A	PHENOSEAL (M) 40# BAG)	150.00	1.2200	183.00
1126A	THICK SET CEMENT	110.00	18.3000	2013.00
1110A	KOL SEAL (50# BAG)	550.00	.4400	242.00
4453	4 1/2" LATCH DOWN PLUG	1.00	232.0000	232.00
4161	FLOAT SHOE 4 1/2" AFU	1.00	286.0000	286.00
4103	CEMENT BASKET 4 1/2"	1.00	218.0000	218.00
4129	CENTRALIZER 4 1/2"	4.00	42.0000	168.00

Description	Hours	Unit Price	Total
445 CEMENT PUMP	1.00	975.00	975.00
445 EQUIPMENT MILEAGE (ONE WAY)	40.00	4.00	160.00
515 TON MILEAGE DELIVERY	379.00	1.26	477.54
611 TON MILEAGE DELIVERY	379.00	1.26	477.54

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DEC 12 2011

KCC WICHITA

Parts:	7340.00	Freight:	.00	Tax:	609.23	AR	10039.31
Labor:	.00	Misc:	.00	Total:	10039.31		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

ELDORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

GILLETTE, WY  
307/686-4914

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

WORLAND, WY  
307/347-4577



**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 31526  
LOCATION Fixeva  
FOREMAN Rick Ledford

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

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

API# 15-019-27060

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-8-11	6305	Shaffer B. #14	14	326	10E	CO
CUSTOMER <u>Patterson Oil</u>			C+G Orls			
MAILING ADDRESS <u>P.O. Box 177</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY <u>Madison</u>			STATE <u>KS</u>	ZIP CODE <u>67353</u>		
			<u>445</u>	<u>Dave</u>		
			<u>515</u>	<u>Chris M</u>		
			<u>611</u>	<u>Chris B.</u>		

JOB TYPE L/S 0 HOLE SIZE 7 7/8" HOLE DEPTH 2011' CASING SIZE & WEIGHT 4 1/2" 11.6 # Non  
CASING DEPTH 2014' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT 12.7#-13.6# SLURRY VOL 128 WATER gal/sk 2.0-9.0 CEMENT LEFT in CASING 0'  
DISPLACEMENT 31.2 DISPLACEMENT PSI 800 PSI 1200 RATE \_\_\_\_\_

REMARKS: Safety meeting - Rig up to 4 1/2" casing. Break circulation w/ 10 Bbl water. Mixed 300 sacks 60/40 Permox cement w/ 8% gel + 1/2" phenoxal/sk @ 12.7#/gal. Tail in w/ 110 sacks thickset cement w/ 5" Kal-seal/sk @ 13.6#/gal. Washout pump + lines, release latch down plus. Displace w/ 31.0 Bbl fresh water. Final pump pressure 800 PSI. Bump plus to 1200 PSI. release pressure, float + plus held. Good cement returns to surface = 20 Bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	40	MILEAGE	4.00	160.00
1131	300 sacks	60/40 Permox cement	11.95	3585.00
1118B	206.5#	8% gel	.20	41.30
1107A	150#	1/2" phenoxal/sk	1.22	183.00
1126A	110 sacks	thickset cement	18.30	2013.00
1110A	550#	5" Kal-seal/sk	.44	242.00
5407A	18.95	ton mileage bulk tires	1.26	23.88
4453	1	4 1/2" latch down plus	232.00	232.00
4161	1	4 1/2" AFV float shoe	286.00	286.00
4103	1	4 1/2" cement basket	218.00	218.00
4129	4	4 1/2" x 7 7/8" centralizers	47.00	188.00
<b>KCC WICHITA</b>				
			Subtotal	9430.08
			8.3% SALES TAX	609.28
			ESTIMATED TOTAL	10,039.36

Ravin 3737

AUTHORIZATION Chris Nelson

2044085  
TITLE Driller C+G

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 form



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 244075

Invoice Date: 09/13/2011 Terms: 0/0/30,n/30

Page 1

PATTESON OIL  
TOM PATTESON  
1343 DOVE, P.O. BOX 177  
MOLINE KS 67353  
(620) 647-3203

SHAFFER B-14  
31553  
14-32S-10E  
09-02-11  
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	40.00	14.2500	570.00
1102	CALCIUM CHLORIDE (50#)	75.00	.7000	52.50
Description		Hours	Unit Price	Total
445	CEMENT PUMP (SURFACE)	1.00	775.00	775.00
445	EQUIPMENT MILEAGE (ONE WAY)	40.00	4.00	160.00
611	MIN. BULK DELIVERY	1.00	330.00	330.00

*Paid*  
*9/15/11*  
*ck # 3837 17*  
*\$1,939.*  
*Sharon*

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KCC WICHITA

Parts:	622.50	Freight:	.00	Tax:	51.67	AR	1939.17
Labor:	.00	Misc:	.00	Total:	1939.17		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

GILLETTE, WY  
307/686-4914

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

WORLAND, WY  
307/347-4577

**CONSOLIDATED**  
Oil Well Services, L.L.C.

 **ENTERED**

TICKET NUMBER 31553  
LOCATION Eureka  
FOREMAN Steve Reed

884, Chanute, KS 66720  
31-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**

**CEMENT API # 15-019-27060**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-2-11	6305	Shaffer #8-14	14	33S	10E	Chautauqua
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Patterson Oil			445	Dave		
MAILING ADDRESS			611	Chris B		
P.O. Box 177						
CITY	STATE	ZIP CODE				
Maline	KS	67353				

JOB TYPE Surface  HOLE SIZE 12 1/4 HOLE DEPTH 48' CASING SIZE & WEIGHT 8 5/8  
 CASING DEPTH 41' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14" SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 5'  
 DISPLACEMENT 2 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 8 5/8 casing. Break circulation with fresh water. Mix 40 sks class A cement with 2% caclz at 14" per gal. Displace with 2 bbls fresh water. Shut well in. Good cement. Returns to surface. Job complete. Rig down.

*Thank you*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE	775.00	775.00
5406	40	MILEAGE	4.00	160.00
11043	40 sks	Class A Cement	14.25	570.00
1102	75 "	Caclz 2%	.70	52.50
5407	1.88 Tons	Ton mileage BULK TRUCK	170.00	330.00
<b>RECEIVED</b>				
<b>DEC 12 2011</b>				
<b>KCC WICHITA</b>				
			Sub Total	1887.50
			SALES TAX	51.67
			ESTIMATED TOTAL	1939.17

Revin 3737

AUTHORIZATION *Dale Coulter* TITLE 244075 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