



KANSAS CORPORATION COMMISSION 1073477  
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: 120 Shoreline Dr.  
Address 2: \_\_\_\_\_  
City: LOUISBURG State: KS Zip: 66053 + 5403  
Contact Person: Kevin Kleweno  
Phone: ( 913 ) 481-4604  
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 #: \_\_\_\_\_

12/08/2011	12/12/2011	2/6/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25839-00-00  
Spot Description: \_\_\_\_\_  
NE SW NW NW Sec. 1 Twp. 16 S. R. 20  East  West  
4516 Feet from  North /  South Line of Section  
4870 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Franklin  
Lease Name: Crawford Well #: 102  
Field Name: Leloup  
Producing Formation: Mississippi  
Elevation: Ground: 962 Kelly Bushing: 0  
Total Depth: 731 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/ 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: 02/07/2012



1073477

Operator Name: Oil Sources Corp. Lease Name: Crawford Well #: 102  
 Sec. 1 Twp. 16 S. R. 20  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 <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/LLC	<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	4	50/50 POZ
Completion	5.6250	2.8750	8	721	Portland	94	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	671.0-681.0	2" DML RTG	10

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  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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McGown Drilling, Inc.  
Mound City, Kansas

**Operator:**  
Oil Sources Corp.  
Overland Park, KS

**Crawford #102**  
Franklin Co, KS  
1-16S-20E  
API: 059-25839

<b>Spud Date:</b>	12/8/2011	<b>Surface Bit:</b>	9.875"
<b>Surface Casing:</b>	7"	<b>Drill Bit:</b>	5.625"
<b>Surface Length:</b>	20.40'	<b>Longstring:</b>	721.55'
<b>Surface Cement:</b>	4 sx	<b>Longstring Date:</b>	12/12/2011

**Driller's Log**

Top	Bottom	Formation	Comments
0	3	Soil	
3	15	Clay	
15	27	Shale	
27	29	Lime	
29	36	Shale	
36	51	Lime	
51	57	Shale	
57	71	Lime	
71	74	Shale	
74	95	Lime	
95	113	Shale	
113	115	Lime	
115	134	Shale	
134	167	Lime	
167	225	Shale	
225	248	Lime	
248	262	Shale	
262	268	Lime	
268	289	Shale	
289	302	Sand	See below
302	315	Shale	
315	319	Lime	
319	333	Shale	
333	353	Lime	333-337 Trace of oil
353	362	Shale	
362	401	Lime	

Crawford #102  
Franklin Co., KS

401	515	Shale	
515	525	Sand	Clean - no oil show
525	573	Shale	
573	584	Lime	
584	618	Shale	
618	627	Lime	Brown
627	657	Shale	
657	659	Lime	
659	667	Shale	
667	680	Sand	See below
680	731	Shale / Sandy shale	
731		TD	

**Sand Detail:**

289-295: Good odor; good bleed to pit

295-296: odor, no bleed

296-302: Good odor; fair bleed to pit

**Squirrel core: 671-685 Rec. 12'**

671-679.50: Good brown sand; porous, little to no shale; Good / very good saturation

679.50-682: shale / sandy shale - no oil

