

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1074679

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 # 5682	. <u></u>		API No. 15				
Name: Hughes Drilling Co, Address 1: 122 MAIN	a General Partn	ership 	Spot Description: SE_NW_NW_NE_Sec11Twp16SR20/EastWest 4900				
Address 2: City: WELLSVILLE St	ate: KS Zip:	66092 + 8522					
Contact Person: Clay Hughes Phone: (785) 883-2235 CONTRACTOR: License # 5682		· · · ·					
Name: Hughes Drilling Co, a	General Partners	ship					
Wellsite Geologist: NA Purchaser:	- · ·	·-·- – –	Field Name: Leloup Producing Formation: Squirrel				
Designate Type of Completion: [✓] New Well [☐] Re-Entry [☐] Workover			Elevation: Ground: 966 Kelly Bushing: 0 Total Depth: 795 Plug Back Total Depth:				
Oil WSW Gas D&A GG CM (Coel Bed Melhene) Cathodic Gother (Core	SWD SWB GSW DENHR GSW DENHR GSW	SIOW SIGW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: 30 Feet Multiple Stage Cementing Collar Used? Yes VNo If yes, show depth set: Feet If Alternate II completion, cement circulated from: 6 feet depth to: 30 w/ 8 sx cmt.				
If Workover/Re-entry: Old Well Inf	o as follows:		sx cmt.				
Operator: Well Name:	<u> </u>		Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)				
Original Comp. Date:		al Depth: NHR Conv. to SWD SSW	Chloride content: 1500 ppm Fluid volume: 80 bbls Dewatering method used: Evaporated				
Plug Back: Commingled Dual Completion SWD	Permit #:	Back Total Depth	Location of fluid disposal if hauled offsite: Operator Name: Lease Name: Cuarter_ Sec. Twp. S. R East West				
[] GSW	Permit#:		County: Permit #:				
1/11/2012 1/12/20 Spud Date or Date Res		2/15/2012 Completion Date or					
Recompletion Date		Recompletion Date	:				

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				
ALTItIIIIII Approved by: Dearns Gerriso Date: 02/22/2012				

Operator Name: Hug	hes Drilling Co, a	General <u>Partners</u> t	OID Lease Name:	South McMill	<u>en</u>	. Well #: I-1	,
Sec. <u>11</u> Twp. <u>16</u>	s. R. <u>20</u>	✓ East ☐ West	County: _Fra	nklin			-
time tool open and clo	sed, flowing and shu s if gas to surface te	d base of formations per t-in pressures, whether st, along with final char well site report.	shut-in pressure re	ached static level	, hydrostatic pres	sures, bottom l	hole temperature, fluid
Drill Stem Tests Taken (Attach Additional S		[] Yes ☑ No		_	ın (Top), Depth a		Sample
Samples Sent to Geological Survey		Yes Z No	Na Gam	me maRay		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)		Yes No Yes No Yes No		,			
List All E. Logs Run:	/OO!		ı				
GammaRay/Neutror	·		G RECORD ✓ I	_	ion, 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	30	Portland	8	50/50 POZ
Completion	5.6250	2.8750	8	785	Portland	114	50/50 POZ
Purpose: - Perforate - Protect Casing - Plug Back TD - Plug Off Zone	Depth Top Bottom	ADDITIONA Type of Cement	# Sacks Used	QUEEZE RECORD		Percent Additives	
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth						
3	731.0-738.0			2" DML RTC		-	7
· · · · ·		<u>.</u> .		-			-
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes [] No		
Date of First, Resumed (Production, SWD or EN	HR. Producing Me		Gas Lift [](Other (Explain)		
Estimated Production Per 24 Hours	Oit	Bbls. Gas	Mcf W	ater B	bis.	Gas-Oil Ratio	Gravity
DISPOSITIO	ON OF GAS:	[] Open Hole		lly Comp. [] Coi	mmingled	PRODUCTIO	ON INTERVAL:
(If vented, Sub-	mit ACO-18.)	[] Other (Specify)	100000		, 1.00 -1)		

Summary of Changes

Lease Name and Number: South McMillen I-1

API/Permit #: 15-059-25887-00-00

Doc ID: 1074679

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved Date	02/15/2012	02/22/2012
Producing Formation	Bartlesville	Squirrel
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10 74156	//kcc/detail/operatorE ditDetail.cfm?docID=10 74679