



KANSAS CORPORATION COMMISSION 1076766
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 # 34008
Name: Owens Petroleum LLC
Address 1: 1274 202ND RD
Address 2: _____
City: YATES CENTER State: KS Zip: 66783 + 5411
Contact Person: Scott Owens
Phone: (620) 496-7048
CONTRACTOR: License # 33986
Name: Owens Petroleum Services, LLC
Wellsite Geologist: none
Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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>01/09/2012</u>	<u>01/16/2012</u>	<u>02/28/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-207-27985-00-00

Spot Description:
SE SE SW SW Sec. 33 Twp. 23 S. R. 16 East West
165 Feet from North / South Line of Section
1155 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Woodson

Lease Name: Tannahill Well #: 26

Field Name: Vernon

Producing Formation: Squirrel

Elevation: Ground: 1061 Kelly Bushing: 0

Total Depth: 1136 Plug Back Total Depth: _____

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: 0

feet depth to: 1136 w/ 158 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 300 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Owens Petroleum, LLC

Lease Name: Roberts License #: 34008

Quarter SE Sec. 04 Twp. 2 S. R. 16 East West

County: Woodson Permit #: D20591

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 Garriso Date: 03/27/2012



1076766

Operator Name: Owens Petroleum LLC Lease Name: Tannahill Well #: 26
 Sec. 33 Twp. 23 S. R. 16 East West County: Woodson

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 Name Top Datum Squirrel 1054 -7
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	11.625	7	17	40	Portland	20	
Production	5.625	2.875	6.5	1113	Pozmix	158	

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: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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FED ID # 48-1214033
 Shop # (620) 437-2661
 Cellular # (620) 437-7582
 Office # (316) 303-9515
 Office Fax # (316) 263-0432

Hurricane Services, Inc.
Cementing & Circulating Division
 250 N. Water, Suite 200
 Wichita, KS 67202

MC ID# 165290

Shop Address: 3613A Y Road
 Madison, KS 66860

Customer:
 OWENS PETROLEUM
 1274 202ND ROAD
 YATES CENTER, KS 66783

Invoice Date: 1/22/2012
 Invoice #: 0018777
 Lease Name: TANNIHILL

Well #: 26

County: WOODSON

Date/Description	HRS/QTY	Rate	Total
01/16/12 Drove to location, rigged up and cemented the longstring per attached Service ticket #100013 - Pump charge	1.00	790.00	790.00
Pump truck mileage - one way	35.00	3.25	113.75
70/30 Pozmix cement	158.00	11.40	1,801.20 T
Gel 2%	278.00	0.30	83.40 T
Flocele 1/4 #pu/sk	40.00	1.85	74.00 T
Gel - flush ahead	200.00	0.30	60.00 T
Water truck #105	3.50	84.00	294.00
Pickup truck mileage - one way	35.00	1.50	52.50
Bulk truck mileage - one way	7.20	40.25	289.80
2 7/8" top rubber	2.00	25.00	50.00 T
5% fuel surcharge	1.00	180.43	180.43

Net Invoice 3,789.08
 Sales Tax: (7.30%) 151.01
Total 3,940.09

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!