

Kansas Corporation Commission
Oil & Gas Conservation Division

1078714

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	•		AP! No. 15 - 15	-121-29000-00-00)	
Name: Town Or Address 1: 16205 W	Company Inc. / 287TH ST		Spot Description: SE_NE_SW_N		p. 18 S. R. 21	7 5
Address 2: City: PAOLA	State: KS	Zip: 66071 + 8482	3445 1550	Feet from		th Line of Section
	ster Town 294-2125 _{1986 #} 6142		NE		Outside Section Corne	
	ompany Inc.		rease Manie.	tchen	Well#	16
ū	•		Field Name: Pa	aola-Rantoul		
Purchaser:			Producing Format	tion: Squirrel		
Designate Type of Com	pletion:		Elevation: Groun	d: 891	. Kelly Bushing: 0	
✓ New Well	Re-Entry	Workover		Plug Back To		
	WSW SWD D&A ENHR GSW	SIGW Temp. Abd.	Amount of Surface Multiple Stage Ce	e Pipe Set and Cer menting Collar Use	nented at: 20	Feet
CM (Coal Bed Me	ethane)		If yes, show depth		0	Feet
Cathodic 👝	Other (Core, Expl., etc.):			pletion, cement circ	_	
If Workover/Re-entry: (feet depth to: 20		w/ ³	sx cmt.
Operator:			· · · · · · · · · · · · · · · · · · ·			
Well Name:			Drilling Fluid Mar	nagement Plan		
Original Comp. Date:	Original T	otal Depth:	(Data must be collect	led from the Reserve	Pit)	
Deepening	_	ENHR Conv. to SWD	Chloride content: Dewatering method		n Fluid volume: 80 ed	bbls
, Plug Back:	Plu	g Back Total Depth	Location of fluid dis	sposal if hauled off	site:	
Commingled Dual Completion	Permit #: Permit #:		Operator Name:			
; swd		·—	Lease Name:	·	_ License #:	
ENHR			Quarter Sec	c. Twp.	S. R.	East West
¹ GSW			County:	Pe:	mit #:	
1/25/2012	1/27/2012	4/9/2012	-			
Spud Date or Recompletion Date	Date Reached TD	Completion Date or 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 Conf	identiality Received
Date:	
Confidential R	delease Date:
Wireline Log F	Received
Geologist Rep	
UIC Distribution	on
ALT [] [[√]	III Approved by: Decrea Garriso Date: 04/16/2012

Side Two

1078714

Operator Name:	-	ny inc.	Lease Name	: Kitchen	<u></u>		6
Sec. 13 Twp. 1	8 s. _{R.} 2 <u>1</u>	√ East □ West	County: Mi	ami			
	ates if gas to surface	s and base of formations shut-in pressures, whethe e test, along with final cha ical well site report.					
Drill Stem Tests Take (Attach Additional		Yes _∕_No	[/	Log Format	tion (Top), Depth	and Datum	. Sample
Samples Sent to Geo	ological Survey	☐ Yes ☑ No		ame		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Cop		Yes No Yes No Yes No	Gar	nma Ray			
List All E. Logs Run:							
Gamma Ray Neutr	on Completion Lo	g					
	Ţ	Report all strings se	NG RECORD [7]	NewUsed	ction, 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	6.2500	₋ 10	20	Portland	, 3	50/50 POZ
Completion	5.6250	2.8750		535	Portland	76	50/50 POZ
	Ţ						i
Purpose:	1	ADDITION	AL _, CEMENTING / SC	QUEEZE RECORI)		
Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and	Percent Additives	6
Protect Casing Plug Back TD Plug Off Zone	-		•	•	• •••••	_	- -
		- - , ,	* = = = - : :	·* -·· _			
Shots Per Fool	PERFORA Specif	TION RECORD - Bridge Plu y Footage of Each Interval Po	ugs Set/Type erforated	Acid, Fra	acture, Shot, Cemer Imount and Kind of N	nt Squeeze Recor laterial Used)	, d Depth
2	500.0-508.0 25	5 Perfs		Acid 500 ga	I. 7.5% HCL	-	- →
	-			+	_		
				t			
•		· -	· 	† ·			
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes ¦No		
Date of First, Resumed F	Production, SWD or E	NHR. Producing Me	thod:	Gas Lift (
stimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wa	. • — - · ˈ	Other (Explain) 	Gas-Oil Ratio	0
r er 24 MUUIS		· -		* * * * * * * * * * * * * * * * * * * *		CAS-OII NAUU	Gravity
DISPOSITIO	N OF GAS:	-	METHOD OF COMPL	ETION:	· · · · ·		
Vented Sold	Used on Lease			,	nmingled	PRODUCTIO	N INTERVAL:
(If vented, Subn	mit ACO-18.)	1 Other (0	(Submit		nit ACO-4)		



TICKET NUMBER

PO Box 884, Chanute, KS 66720

FIELD TICKET & TREATMENT REPORT

620-431-9210	or 800-467-867	6	CEMEN	IT .			
DATE	CUSTOMER #	1		SECTION	TOWNSHIP	RANGE	COUNTY
1/27/12	7823	Kitchen # 16	2	NE 13	18	21	ASSED MI
CUSTOMER	0-10					** * * * * * * * * * * * * * * * * * *	
1065		many		TRUCK#	DRIVER	TRUCK# ·	DRIVER
MAILING ADDRI		2 0/	ļ	481	Casken	ck	\
16205	W. 287	, <u>M</u>		485	HarBec	HB	
CITY (STATE ZIP CODE		20.3	Ryasin	ÐГ	
Paola		KS 66071				•	<u> </u>
JOB TYPE loe	cstong	HOLE SIZE STE	HOLE DEPTH	15421	CASING SIZE & W	EIGHT 27/8	"EUE
CASING DEPTH	535	DRILL PIPE	_TUBING			OTHER Pin	530'
SLURRY WEIGH		SLURRY VOL		k	CEMENT LEFT In	م والأكد CASING	ubberdua.
		DISPLACEMENT PSI			RATE & 4	pm	7
REMARKS: he	eld satisfies	neeting, established	of crowle	stion, mis	ed towns	red 100 I	F Provid
Gel toll	owed by	10 bots fresh wa	eter ni	xed town	wed 76 &	50/50	POZNIN
converit_	w/ 2%	Cal per Sk , cem	ent to !	syrtace A	boland pulla	dear .	replaced
2/24 rub	berowa	to pin w/ 3.00	t blols fr	esh water	, prosured	to 800 7	S) 54.4
in casin	ر بر الراب الم				7-1		-1,3900
	· · · · · · · ·						
						()	
					11	\rightarrow	<u>.</u>
had own	H.O.X				TAT		

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Clurent pump	 	1030.00
5406	20 mi	MILEAGE ours trick		80.00
5402	535'	Casing tootage		00.
5407	minimum	to mileage		350.00
1124	76 sks	10/2 D		
111813	228 #	50/50 Poznik cement		832.20
4462	1	Premium Gel		47.88
7700		21/2" rubber plug	<u> </u>	38.00
			·	
:		2/17/00/		
X.		AG TOO T		
		7.55%	. SALES TAX	68,55
uthoriztion	RAHMION. a	1,105/6	ESTIMATED	2436.63

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 Owner: TOC

Miami County, KS Well: Kitchen # 16 (913) 294-2125 Commenced Spudding: 1/25/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
1	Soil-Clay	1
3	Gravel	4
1	Lime	5
2	Underclay	7
12	Lime	19
21	Shale	40
8	Lime	48
40	Shale	88
15	Lime	103
8	Shale	111
30	Lime	141
9	Shale & Slate	150
22	Lime	172
5	Shale & Slate	177
4	Lime	181
2	Shale	183
5	Lime	188
100	Shale	298
5	Sand	303
24	Shale	327
5	Lime	332
5	Sandy Shell	337
4	Shale	341
13	Lime	354
6	Shale	360
4	Lime	364
2	Lime	
49	Shale	366 415
4	Lime	419
12	Shale	431
3	Lime	434
19	Shale	
4	Lime	453
5	Shale	457
1	Lime	462
19	Shale	463
10	Lime	482
7	Shale	492
9	Sand	499
3	Sand	<u>508</u> 511

Miami County, KS Well: Kitchen # 16 Lease Owner: TOC

Town Oil Company, Inc. Commenced Spudding: 1/25/2012

31	Sandy Shale	542-TD
·		