

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1079563

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 # 30931	API No. 15 - 15-103-21148-00-01
Name: Daystar Petroleum, Inc.	Spot Description:
Address 1: 522 N. MAIN ST	SW_SE_NE_NW_Sec. 17 Twp. 8 S. R. 21 East [] West
Address 2: PO BOX 560	
City: EUREKA State: KS Zip: 67045 + 0560	North / South Line of Section
Contact Person: Matt Osborn Phone: (620) 583-5527	Feet from East / [] West Line of Section Footages Calculated from Nearest Outside Section Corner:
CONTRACTOR: License # 34059	County: Leavenworth
Name: Hurricane Services, Inc.	Lease Name: ABEL Well #: 21
Wellsite Geologist: None	Field Name:
Purchaser:	Producing Formation: McLouth Sand
Designate Type of Completion:	Elevation: Ground: 1002 Kelly Bushing: 1015
New Well ✓ Re-Entry ── Workover	Total Depth: 1424 Plug Back Total Depth:
Oil WSW SWD SIOW Gas D&A VENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: 41 Feet Multiple Stage Cementing Collar Used? Yes V No If yes, show depth set: Feet If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	, feet depth to: w/ . sx cmt.
Operator: Fairway Petroleum, Inc.	
Well Name: _Abel 21	Drilling Fluid Management Plan
Original Comp. Date: 07/15/1989 Original Total Depth: 1424	(Data must be collected from the Reserve Pit)
Deepening [] Re-perf. ✓ Conv. to ENHR ☐ Conv. to SWD	Chloride content: ppm Fluid volume: _ bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name:License #:
_] SWD	
	= 12 13 11 11
O4/24/2012 Permit #:	County: Permit #:
Spud Date or 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 Confidentiality Received				
Date:				
Confidential Release Date:	ĺ			
Wireline Log Received				
Geologist Report Received	İ			
☑ UIC Distribution	1			
ALT [] I [] III Approved by: Desiring Garrison Date: 04/26/2012				

Side Two



Operator Name: Day	star Petroleum	ı, Inc.	Lease Name:	ABEL		_ Well #: 21	1		
Sec. 17 Twp.8 S. R. 21 East West			County: Lea	County: Leavenworth					
ime tool open and clos	sed, flowing and s s if gas to surface	and base of formations p thut-in pressures, whether test, along with final cha cal well site report.	er shut-in pressure re	eached static level	, hydrostatic pres	ssures, bottom	hole temperature, flui		
Orill Stem Tests Taken		Yes ∠'No		Log Formation	on (Top), Depth a	nd Datum	Sample		
(Attach Additional S	heets)			ıme		Тор			
Samples Sent to Geole	ogical Survey	Yes Z No	non			Datum			
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	•	Yes No							
ist All E. Logs Run:									
Purpose of String	. Size Hole		NG RECORD et-conductor, surface, i Weight Lbs. / Ft.	New JUsed Intermediate, product Setting Depth	ion, etc. Type of Cement	# Sacks Used	Type and Percent		
Surface	12	7.5	20		+ · · · ·	20	Adultives		
Production	6.5	4.5	' 9.5	1424	+ Portland	159	69/ 001		
. , , , , , , , , , , , , , , , , , , ,	0.0	+	+	- 1424	+	109	6% gel		
	;	A DOLTION	: IAL CEMENTING / SO			į	l_		
Purpose:	Depth	Type of Cement	# Sacks Used	JOEEZE RECORD		Percent Additives	s		
Perforate Protect Casing Plug Back TD Plug Off Zone	Top Bottom	·+	· !	- 					
-	1								
Shots Per Foot	r 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	1407-1414	1414			Gelled water frac. 1407				
3	1380-1388			Ī			+		
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TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes [] No)	٠		
Date of First, Resumed F	roduction, SWD or I	ENHR. Producing M Flowing	lethod:	Gas Lift C	Other (Explain)				
Estimated Production Per 24 Hours	Oìl	Bbls. Gas	Mcf W	ater B	bls.	Gas-Oil Ratio	Gravity		
DISPOSITIO	N OF GAS:		METHOD OF COMP	LETION:		PPODUCT	ON INTERVAL:		
Vented Sold	Used on Leas	Open Hole	Perf. Dua	lly Comp Cor	mmingled	i Nobocii	OH HATERANE.		
(If vented, Subn	nit ACO-18.)	Other (Specify)		it ACO-5) (Sub	mit ACO-4)				