

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1082511

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 # 31389	API No. 15
Name: Noble Petroleum, Inc.	Spot Description:
Address 1: 3101 N ROCK RD STE 125	NW_NE_NW_SW Sec. 27 Twp. 24 S. R. 4 ▼ East West
Address 2:	Feet from North / South Line of Section
City: WICHITA State: KS Zip: 67226	
Contact Person: Jay Ablah	
Phone: (316) 636-2222	NE □NW □SE ☑SW
CONTRACTOR: License #32701	County: Butler
Name: C & G Drilling, Inc.	Lease Name: Klaassen-Manns Well #: 1
Wellsite Geologist: Robert Stolzle	Field Name: Plum Grove South
Purchaser: None	None
Designate Type of Completion:	Elevation: Ground: 1366 Kelly Bushing: 1372
	over , Total Depth: 2845 Plug Back Total Depth: 0
	SIOW Amount of Surface Pipe Set and Cemented at: 211 Feet
☐ Gas	SIGW Multiple Stage Cementing Collar Used? Yes No
	☐ Temp. Abd.
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	·
If Workover/Re-entry: Old Well Info as follows:	w/sx ciric
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth	
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR	
Conv. to GSW	Dewatering method used:
Plug Back: Plug Back To	tal Depth Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name: Noble Petroleum, Inc.
Dual Completion Permit #:	Lease Name: Klaassen License #: 31389
SWD Permit #:	·
ENHR Permit #:	Quarter SE Sec. 27 Twp. 24 S. R. 4 V East West
GSW Permit #:	County: Butler Permit #: D-30663
5/14/2012 5/19/2012 5/20/2	012
	tion Date or

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 Approved by: Deanna Garrison Date: 05/30/2012

Side Two



Operator Name: Nobl	e Petroleum, In	C		Lease	Name: _	Klaassen-Ma	nns	Well #:1		
Sec. 27 Twp.24	s. R. <u>4</u>	✓ East	West	County	y: Butle	r				
INSTRUCTIONS: Show time tool open and clos recovery, and flow rates line Logs surveyed. Att	ed, flowing and shu if gas to surface to	ıt-in pressu est, along v	ures, whether si vith final chart(s	hut-in pres	ssure read	ched static level,	hydrostatic pro	essures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional Sh	neets)	Ye	es 📝 No			og Formatio	n (Top), Depth	and Datum	√ \$	Sample
Samples Sent to Geolo	gical Survey	 ✓ Ye	es 🗌 No		Nam Attach			Top Attached		Datum ttached
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	Electronically	Ye Ye Ye	es 🗹 No							·
List All E. Logs Run:										
			CASING	RECORD	✓ Ne	ew Used				
	Ci Hal-	r				ermediate, product	ſ	# C!	Time	and Decemb
Purpose of String	Size Hole Drilled		te Casing t (In O.D.)		ight . / Ft.	Setting Depth	Type of Cement	# Sacks Used		and Percent additives
Surface	12.25	8.625		23		211	Class A	120	3%CaCl, 2	% gel, .25# Flocels
			ADDITIONAL	CEMENT	ING / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom				s Used		Type ar	d Percent Additives	;	
—— Perforate —— Protect Casing —✓ Plug Back TD	161-261	60/40 Poz		35 4% gel			 			
Plug Off Zone	0-60	60/40 P	oz.	25		4% gel				
						1	······································			
Shots Per Foot	PERFORAT Specify	ON RECOF	RD - Bridge Plug Each Interval Per	s Set/Type forated	Set/Type Acid, Fracture, Shot, C (Amount and Kind			Cement Squeeze Record d of Material Used)		Depth
							<u> </u>	•••		
			· · · · · · · · · · · · · · · · · · ·							
			<u> </u>				* ,	· · · · · · · · · · · · · · · · · · ·		
TUBING RECORD:	Size:	Set At:		Packer /	At:	Liner Run:	Yes 🗸	No		
Date of First, Resumed P	roduction, SWD or EN	IHR.	Producing Meti	hod: Pumpi	ng 🗌	Gas Lift (Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas پ	Mcf	Wat	er B	bls.	Gas-Oil Ratio		Gravity
DISPOSITIO	N OF GAS:			METHOD O	F COMPI I	ETION:		PRODUCTION	ON INTER	VAL:
Vented Sold	Used on Lease		Open Hole	Perf.	Dually	Comp. Cor	nmingled			
(If vented, Subn	nit ACO-18.)		Other (Specify)		(Submit .	ACO-5) (Sub	mit ACO-4)	· · ·		

Form	ACO1 - Well Completion
Operator	Noble Petroleum, Inc.
Well Name	Klaassen-Manns 1
Doc ID	1082511

Tops

Rema	(a) 9	9. 4.
Heebner	1600	-228
Douglas	1631	-259
Brown Lime	1785	-413
Lansing	1881	-509
BKC	2318	-946
Cherokee	2525	-1153
Mississippian	2577	-1205
Kinderhook	2716	-1344
Hunton	2826	-1454
RTD	2845	-1473



TICKET NUMBER	34661	
LOCATION FLICEKO		
5555	•	

ON ACOUNTY FFE			FOREMAN STEW MEAN				
	Chanute, KS 66720 F or 800-467-8676	IELD TICKET & TR CEM		ORT 5-015-23	945		
DATE	CUSTOMER# W	ELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
5-14-12 CUSTOMER	6631 Klaasser	-Man #	27	245	4E Butler		
Alabla	Patrolaum Tree		TRUCK#	DRIVER	TRUCK#	DRIVER	
MAILING ADDF	Petroleum Ins		485	Alanm			
7/0/	AL Part Pd STA 1	24	479	mark			
CITY	N. Rock Rd STO 12	ZIP CODE	-22	//ACC			
Luckin	- KS	65256					
	Chace G HOLE SIZE		EPTH	CASING SIZE &	WEIGHT & SA	23%	
	H ZII' DRILL PIPE				OTHER		
	SHT 14 STURRY VO				n CASING 78		
	NT 18.15 LAVE DISPLACEM			RATE	II CHAING PO		
						 	
VEHICLION S	OFTY Meeting: 87	up 70 S TX Colling	- ZSMAOR CITCHI	atton luit	LECSA W	<u> </u>	
	Trans Azed D. 132	CA Ja Cocke 240	el & 4-110-C	ale bechy	AT 14.8	20/10	
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		the state of					
	7.0	Thouskyou					
ACCOUNT	QUANITY or UNITS	DESCRIPTIO	N of SERVICES or PR	ODUCT	UNIT PRICE	TOTAL	
CODE				· · · · · · · · · · · · · · · · · · ·		[7]	
54415		PUMP CHARGE			875.00	875.00	
5406	40	MILEAGE			4.00	160.00	
11045	120	Class A Camen	T		14.95	1794.6	
1102	335-	32 COC/2			.74	247.90	
11183	225*	3% Ge)			. 21	47.25	
1107	30 €	1/4 F/0 - Cale 1	Porist		2.35	70.50	
5407		7.	963 13 Year 10		co 2/	750.00	
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	1	1		6.55%	SALES TAX	141.40	
vin 3737				6.55%	SALES TAX ESTIMATED TOTAL	741.40 7636.1	

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



TICKET NUMBER	34671
LOCATION EURA	
FOREMAN RICK /	

DATE	CUSTOMER #) \\(\lambda \(\lambda \(\lambda \)	L NAME & NUMB	ED	T SECTION	1 * 15-015	RANGE	COUNTY
		<u> </u>			27			
5-19-12	5631	Klaassen-	laamen - Mann #/			243	46	Butler
USTOMER	111 01	, ,,,		CLC				
AILING ADDR	Table Cetro	eum Inc.		Rigi	TRUCK#	DRIVER	TRUCK#	DRIVER
				נייין	520	Clife		
3	101 M. Loca	PJ St 125	•	,	(ele?	Allen B	ļ	1
ITY		STATE	ZIP CODE					
		KS	į.	•		<u> </u>	 	
OB TYPE (HOLE SIZE			H_2845'			
		· · · · · · · · · · · · · · · · · · ·				CASING SIZE & V		-
	1	DRILL PIPE					OTHER	
LURRY WEIGI	HT <u>/ 4 *</u>	SLURRY VOL_		WATER gal/s	sk <u>7.0</u>	CEMENT LEFT IN	CASING	<u></u>
SPLACEMEN	T	DISPLACEMEN	T PSI	MIX PSI		RATE		
EMARKS:	Safety man				vaging orders	College		
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			10 385 64	<i>G/</i>		 		

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ACCOUNT CODE	QUANITY	or UNITS	DES	SCRIPTION o	f SERVICES or PRO	DOUCT	UNIT PRICE	TOTAL
54050	/		PUMP CHARGE				1030.00	1030.40
5406	25	•	MILEAGE	· · · · · · · · · · · · · · · · · · ·			4.00	100.00
				****			7.00	770.00
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3 40-7								
3 40-7								
3 407								
3 401								2/ 2//
							Subforta)	2674.60
						(, 559,	SALES TAX ESTIMATED	2674.66

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