

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1085147

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 #	API No. 15 - 15-121-28972-00-00
Name: Reusch Well Service, Inc.	Spot Description:
Address 1: PO BOX 520	SE_NE_NW_SE_Sec5 Twp. 17_S. R. 22 Sest West
Address 2:	2300 Feet from North / South Line of Section
City: OTTAWA State: KS Zip: 66067 +	1525 Feet from V East / West Line of Section
Contact Person: BOB REUSCH	
Phone: (785) 242-2043	Footages Calculated from Nearest Outside Section Corner:
CONTRACTOR: License # 33734	□ NE □ NW ☑ SE □ SW County: Miami
Name: Hat Drilling LLC	Lease Name: REYNOLDS Well #: 14
NONE NONE	
Purchaser:	Field Name:
Designate Type of Completion:	Producing Formation: SQUIRREL
	Elevation: Ground: 1118 Kelly Bushing: 1118
✓ New Well Re-Entry Workover	Total Depth: 723 Plug Back Total Depth:
[V] OII ☐ WSW ☐ SWD ☐ SIOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW	Amount of Surface Pipe Set and Cemented at: 21 Feet
	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
☐ OG ☐ GSW ☐ Temp. Abd. ☐ CM (Coel Bed Methane)	If yes, show depth set: Feet
Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from: 719
If Workover/Re-entry: Old Well Info as follows:	feet depth to: 0 w/ 114 sx cmt.
Operators	
Well Name:	Drilling Fluid Management Plan
Original Comp. Date: Original Total Depth:	(Data must be collected from the Reserve Pit)
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	Chloride content: 0 ppm Fluid volume: 80 bbls
Conv. to GSW	Dewatering method used: Evaporated
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	QuarterSecTwp,S. R[]East West
GSW Permit#:	County: Permit #;
01/10/2012 01/11/2012 04/14/2012 Spud Date or Date Reached TD Completion Date or	
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 regutations promulgated to regulate the oil and gas industry have been fully compiled 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 Approved by: Dearna Gerrison Date: 06/21/2012



Operator Name: Re	<u>usch Well Servic</u>	e, Inc.	Lease Na	ame: RE	YNOLDS	 	. Well #:14	
Sec. 5 Twp. 17	s. R. <u>22</u>	. 🗸 East 🗌 West	County: _	Miami				
time tool open and cl	osed, flowing and sh tes if gas to surface t	nd base of formations pe ut-in pressures, whether est, along with final char al well site report.	shut-in pressu	ire reached	l static level	l, hydrostatic press	sures, bottom t	nole temperature, fluid
Drill Stem Tests Taken Yes V No (Attach Additional Sheets)			✓ Log Formation (Top), De			pth and Datum Sa		
Samples Sent to Geological Survey		□ Vaa		Name SQUIRRE			Top 673	Datum 683
Cores Taken Electric Log Run Electric Log Submitted Electronically (If no, Submit Copy)		☐ Yes ☑ No ☑ Yes ☐ No ☑ Yes ☐ No		SQUIRREL			073	003
List All E. Logs Run;								
GAMMA RAY NEU	TRON							
! !		CASING Report all strings se	G RECORD		Used	tion, etc.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight	1	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
SURFACE	9.875	7	20	20		PORTLAND	6	
PRODUCTION	5.625	2.875	6	71	9	50/50POZ	114	
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	ADDITIONATIVE OF COMMENTS AND ADDITI	# Sacks U		ZE RECORD	···· · ·	Percent Additives	
Shots Per Foot		rgs Set/Type erforated		Add, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)				
3	673-683			5	5500 SAND, 7500 WATER			673-683
TUBING RECORD:	Size:	Set At:	Packer At:	Lir	ner Run:	Yes No	- ·	
Date of First, Resumed 04/14/2012	Production, SWD or El	NHR. Producing Me	thod; ✓ Pumping	[] Gas	Lift []	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Water	В	Bbls.	Sas-Oil Ratio	Gravity
DICDOCITI	ON OF CAR							
	ON OF GAS: Used on Lease bmit ACO-18.)	Open Hole	METHOD OF CO	OMPLETION Duality Con Submit ACO	ıp. 🔲 Coı	mmingled mit ACO-4)	PRODUCTIO	ON INTERVAL:



Ravin 3737

AUTHORIZTION

TICKET NUMBER	36819
LOCATION_OF	wa Ks
FOREMAN /	1:111 1

PO Box 884, C 620-431-9210	hanute, KS 6672 or 800-467-8676		LD HCKET & TREA CEMEN		ORT		
DATE	CUSTOMER#	· WEL	L NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1/11/12	7069	Reyno	lds # 14	SE 5	/.7	22	mi
CUSTOMER	1 - 1	, -		经验验的		COLOR HAND	
MAILING ADDRE	sch Dil	well	· · ·	TRUCK#	DRIVER	TRUCK#	DRIVER
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	. Baz 5	20	 .	495	HARBEC	MIB	7
CITY		STATE	ZIP CODE	اهر ک	CASKEN	EK.	
Otto		KS	66067	548	KEICAR	KC	
JOB TYPE LO	7/ // //	HOLE SIZE	55/8 HOLE DEPTH	1	CASING SIZE & V	VEIGHT27	"EUE
CASING DEPTH		DRILL PIPE	TUBING		<u> </u>		
SLURRY WEIGH		SLURRY VOL_	WATER gal/s	K	CEMENT LEFT In	CASING 25	10109
DISPLACEMENT		DISPLACEMEN	IT PSI MIX PSI	· · · · · · · · · · · · · · · · · · ·	RATE_5 3 P	n	
REMARKS: E	stablish	circular	Clon- Mixt Puma	100 \$ Pro	mion Lal		Mxt
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			- Maria Casi	ng,			
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ACCOUNT	CHANTO	- 111170	T	 		· · · · · · · · · · · · · · · · · · ·	·
CODE	QUANITY	or UNITS	DESCRIPTION of	SERVICES or PRO	DDUCT :	UNIT PRICE	TOTAL
5401	·- 	<u> </u>	PUMP CHARGE		495		
5406	<u>:</u>	20 mi	MILEAGE		495		<u>2°050′</u> 2°080
5402		<i>د</i> %	Casing Pooto		-773		
5407	minin		Ton Miles	78			N/c
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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

7.55%

SALES TAX

ESTIMATED

TOTAL

DATE_

10095

3078.6