

Kansas Corporation Commission Oil & Gas Conservation Division 1080076

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 #4339	API No. 15 - 15-011-23891-00-00			
Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.	Spot Description:			
Address 1: 2449 US HIGHWAY 7	NW_NW_NE_SW_Sec29 Twp23 S. R24 FEast West			
Address 2:				
City: MAPLETON State: KS Zip: 66754 + 9443	3795 Feet from ✓ East / West Line of Section			
Contact Person: Dale Jackson	Footages Calculated from Nearest Outside Section Corner:			
Phone: (620) 363-2683	□ne □nw ☑se □sw			
CONTRACTOR: License # 4339	County: Bourbon			
Name:Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.	Lease Name: Well #: PA6			
Wellsite Geologist: NA	Field Name:			
Purchaser:	Producing Formation: Bartlesville			
Designate Type of Completion:	Elevation: Ground: 814 Kelly Bushing: 819			
	Total Depth: 320 Plug Back Total Depth:			
✓ oii	Amount of Surface Pipe Set and Cemented at: 20 Feet			
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? Yes No			
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set: Feel			
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from: 314			
Cathodic Other (Core, Expl., etc.):	feet depth to: 0 w/ 38 sx cmt			
If Workover/Re-entry: Old Well Info as follows:	tot dopti to			
Operator:				
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)			
Original Comp. Date: Original Total Depth:	Chloride content:ppm Fluid volume:bbls			
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD				
Conv. to GSW	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 Permit #:	Quarter Sec TwpS. R			
☐ ENHR Permit #:	County: Permit #:			
GSW Permit #:				
Spud Date or Date Reached TD Completion Date or				
Recompletion Date 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:			
Wireline Log Received			
Geologist Report Received			
UIC Distribution			
ALT I I II Approved by: Deanna Gerisor Date: 06/06/2012			

Side Two



Operator Name: Jackson	on, Dale E & Sue Ellen db	a Dale E. Jackson Production Co	. Lease Name:	Jackson		. Well #:PA	<u> </u>		
Sec. 29 Twp.23	s. R. <u>24</u>	✓ East West	County: Bou	rbon					
time tool open and clos	sed, flowing and shu s if gas to surface te	nd base of formations pen- ut-in pressures, whether sl est, along with final chart(s I well site report.	hut-in pressure re	ached static level,	hydrostatic press	ures, bottom l	hole tempe	erature, fluid	
Drill Stem Tests Taken			Log Formation (Top), Dep		th and Datum		Sample		
Samples Sent to Geological Survey		☐ Yes 🕡 No		Name Fort Scott Lime		Top D 94		atum	
Cores Taken Electric Log Run Electric Log Submitted (If no. Submit Copy)	Yes No No Yes No No bmitted Electronically Yes No		Bartle	Bartlesville 283					
List All E. Logs Run:									
		CASING Report all strings set-c	_	New / Used	ion etc				
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used		and Percent	
Surface Casing	9.875	7	10	20	Portland	5	Additives None		
Production Casing	5.625	2.875	6	314	Portland	38	None		
		ADDITIONAL	CEMENTING / SO	UEEZE RECORD					
Perforate lop Bottom Protect Casing Plug Back TD		Type of Cement	pe of Cement # Sacks Used		Type and Percent Additives				
		•							
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 Ef	NHR. Producing Meta	hod:	Gas Lift C	Other (Explain)				
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mef W	ater B	bls.	Gas-Oil Ratio		Gravity	
					*				
	DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:						/AL:		
Vented Sold	_	Open Hole			mmingled mit ACO-4)				

Avery Lumber

MOUND CITY, KS 66056 {913} 795-2210 FAX {913} 795-2194

Customer Copy INVOICE

PLEASE REFER TO INVOICE NUMBER ON ALL CORRESPONDENCE

Page: 1		Invoice: 20024379
Special: Faulhabar & Jacks: Instructions: : Sale rep #: SCOLEMAN STEVE	Acct rep code:	Time: 11:27:00 Ship Date: 10/20/11 tnvoice Date: 10/20/11 Due Date: 10/20/11
Sold To: CASH CUSTOMER - TAXABLE	Ship To: CASH CUST	OMER - TAXABLE
Customer #: *9 Cu	istomer PO:	Order By:

EXTENSION PRICE Alt Price/Uom DESCRIPTION ITEM# ORDER SHIP L U/M 1982.61 9.4410 9.4410 BAG PORTLAND CEMENT CPPC 210.00 L BAG 210.00 51.00 17.0000 17.0000 EA QUIKRETE PALLETS 3.00 L EA CPQP 3.00 FILLED BY CHECKED BY DATE SHIPPED \$2033.61 Sales total Check # 1181 2182.06 **Customer Pickup** - RECEIVED COMPLETE AND IN GOOD CONDITION -2033.61 Taxable

2 - Customer Copy

2182.06

Total applied:

TOTAL \$2182.06

148.45

0.00 Sales tax

Non-taxable

Tax#