



KANSAS CORPORATION COMMISSION 1085414
OIL & GAS CONSERVATION DIVISION

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 # 34339
Name: D & Z Exploration, Inc.
Address 1: 901 N Elm St.
Address 2: PO BOX 159
City: ST ELMO State: IL Zip: 62458 +
Contact Person: Zane Belden
Phone: (618) 829-3274
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: none
Purchaser: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____
04/17/2012 04/19/2012 04/19/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-091-23778-00-00
Spot Description: _____
SE SE SW NE Sec. 28 Twp. 14 S. R. 22 East West
2805 Feet from North / South Line of Section
1450 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Johnson
Lease Name: Donovan Well #: #9
Field Name: _____
Producing Formation: Bartlesville
Elevation: Ground: 1041 Kelly Bushing: 0
Total Depth: 935 Plug Back Total Depth: 965
Amount of Surface Pipe Set and Cemented at: 30 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 0 ppm Fluid volume: 0 bbls
Dewatering method used: Evaporated
Location of fluid disposal if hauled offsite:
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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 III Approved by: Deanna Garbar Date: 06/25/2012



1085414

Operator Name: D & Z Exploration, Inc. Lease Name: Donovan Well #: #9
 Sec. 28 Twp. 14 S. R. 22 East West County: Johnson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bartlesville	874	
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Submitted Electronically (If no, Submit Copy)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

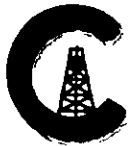
CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9.825	7	20	30	Portland	10	none
Production	5.625	2.825	6.5	935.45	50/50 poz	129	none

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. 06/15/2012	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 249259

Invoice Date: 04/26/2012 Terms: 0/0/30,n/30

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D & Z EXPLORATION
901 N. ELM ST.
P.O. BOX 159
ST. ELMO IL 62458
(618) 829-3274

DONOVAN #9 L.D.E.
36673 -I.D.C.
28-14-22 (cement by Donovan #9)
04-19-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	129.00	10.9500	1412.55
1118B	PREMIUM GEL / BENTONITE	317.00	.2100	66.57
1111	SODIUM CHLORIDE (GRANULA	250.00	.3700	92.50
1110A	KOL SEAL (50# BAG)	645.00	.4600	296.70
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
Description		Hours	Unit Price	Total
369	80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
495	CEMENT PUMP	1.00	1030.00	1030.00
495	EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
548	MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1896.32 Freight: .00 Tax: 142.70 AR 3719.02
Labor: .00 Misc: .00 Total: 3719.02
Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 36673

LOCATION Ottawa KS

FOREMAN Fred Madar

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/19/12	3392	Danovan # 9	NE 28	14	22	JD
CUSTOMER D + Z Exploration			TRUCK# DRIVER TRUCK# DRIVER			
MAILING ADDRESS 901 N Elm Street			506	FREMAD	Safety	MAJ
CITY STATE ZIP CODE St Elmo IL 62458			495	HARBEC	HR	J
			369	DERMAS	DM	
			548	REIDET	RD	

JOB TYPE Log string HOLE SIZE 5 7/8 HOLE DEPTH 965 CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 936 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 544 DISPLACEMENT PSI _____ MIX PSI _____ RATE 58 PPM

REMARKS: Establish circulation. Mix Pump 100# Premium Gel Flush. Mix Pump 129 sks 50/50 Poz Mix Cement - 276 gal 5% Salt. 5" K&I Seal/sk. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to casing TD. Release pressure to set float valve. Shut in casing.

TOS Drilling (Chad)

Fred Madar

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	30 mi.	MILEAGE	455	120 ⁰⁰
5402	936	Casing Footage		N/C
5407	Minimum	Ton miles	518	350 ⁰⁰
5502C	2 hrs	80 BBL Vac Truck	369	180 ⁰⁰
1124	129 sks	50/50 Poz Mix Cement		1412 ⁵⁵
1116B	317 #	Premium Gel		66 ⁵⁷
1111	250 #	Granulated Salt		92 ⁵⁰
1110A	645 #	K&I Seal		296 ⁷⁰
4402	1	2 1/2" Rubber Plug		28 ⁰⁰
			7.525%	SALES TAX 142 ²⁰
				ESTIMATED TOTAL 3719 ⁰²

Rev'n 3737

AUTHORIZATION

Deke Belder

TITLE

249259

DATE

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

Johnson County, KS
Well: Donovan # 9
Lease Owner: D Z

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
4/17/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
9	Soil/Clay	9
1	Lime	10
7	Sandstone	17
37	Shale	54
5	Lime	59
7	Shale	66
15	Lime	81
9	Shale	90
8	Lime	98
9	Shale	107
18	Lime	125
18	Shale	143
19	Lime	162
7	Shale	169
58	Lime	227
19	Shale	246
8	Lime	254
21	Shale	275
10	Lime	285
2	Shale	287
7	Lime	294
32	Shale	328
1	Lime	329
12	Shale	341
24	Lime	365
9	Shale	374
21	Lime	395
5	Shale	400
5	Lime	405
4	Shale	409
6	Lime	415
155	Shale	570
6	Sandy Shale	576
13	Shale	589
4	Lime	593
3	Shale	596
1	Lime	597
8	Shale	605
6	Lime	611
17	Shale	628

Thickness of Strata	Formation	Total Depth	Remarks
9	soil clay	9	
1	lime	10	
7	sandstone	17	
37	shale	54	
5	lime	59	
7	shale	66	
15	lime	81	
9	shale	90	
8	lime	98	
9	shale	107	
18	lime	125	
18	shale	143	
19	lime	162	
7	shale	169	
58	lime	227	
19	shale	246	
8	lime	254	
21	shale	275	
10	lime	285	
2	shale	287	
7	lime	294	
32	shale	326	
1	lime	327	
12	shale	339	
24	lime	363	
9	shale	372	
21	lime	393	

Thickness of Strata	Formation	Total Depth	Remarks
5	shale	400	
5	lime	405	
4	shale	409	
6	lime	415	
155	shale	570	
6	sandy shale	576	
13	shale	589	
4	lime	593	
3	shale	596	
1	lime	597	
8	shale	605	
6	lime	611	
17	shale	628	
3	lime	631	
9	shale	640	
9	lime	649	
100	shale	755	640 mud bed
12	Block sand	767	
105	shale	873	
1	sand	874	
15	concrete	889	8655 - K
76	shale	965	70

BUCKEYE SUPPLY PIPE TALLEY

FROM <u>Willisville</u>				DATE <u>4/15/12</u>			
TO <u>DA? Expedition</u>				P.O. NO.			
TALLY OF	SIZE	IN.	KIND	NEW	USED		
	<u>278</u>		<u>Offset</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
THREAD <u>8cd</u>	WEIGHT			CHG. NO.			
ON (R.R. OR TRUCK CO.)				CAR OR TRUCK NO.			

NO.	FEET	IN.	FEET	IN.	FEET	IN.	FEET	IN.	FEET	IN.
1	31	95	31	40						
2	31	50	31	70						
3	31	95	31	80						
4	31	10	31	80						
5	31	70	30	15						
6	30	65	31	49						
7	31	50	30	00						
8	31	50	31	45						
9	31	55	31	50	<i>below seat</i>					
10	31	60	31	50	<i>below seat</i>					
11	31	10								
12	31	50								
13	30	20								
14	31	40	<i>w/o THOS 10 seat</i>							
15	30	15								
16	31	75					872	15		
17	31	70								
18	31	60	<i>w/o THOS Total</i>							
19	31	50					935	45		
20	31	75								
Total	626	65	313	30						

TOTALS:	No. of Pieces <u>30</u>	Length <u>939</u>	PL <u>95</u>	Ins.
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Remarks: <u>Inventory # 9</u>	TALL
Tallyed by: <u>Hand at Tally</u>	Received By: