



KANSAS CORPORATION COMMISSION 1085318
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 # 32834
Name: JTC Oil, Inc.
Address 1: PO BOX 24386
Address 2: _____
City: STANLEY State: KS Zip: 66283 + _____
Contact Person: Tom Cain
Phone: (913) 208-7914
CONTRACTOR: License # 32834
Name: JTC Oil, Inc.
Wellsite Geologist: NA
Purchaser: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SIOW
 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 #: _____
5/19/2012 5/31/2012 5/31/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-121-29017-00-00
Spot Description: _____
NE NE SE SW Sec. 22 Twp. 17 S. R. 22 East West
1073 Feet from North / South Line of Section
2924 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Miami
Lease Name: ABC Well #: I-5
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 893 Kelly Bushing: 0
Total Depth: 417 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: 20 w/ 3 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 1500 ppm Fluid volume: 80 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 Gortner Date: 06/25/2012



1085318

Operator Name: JTC Oil, Inc. Lease Name: ABC Well #: I-5
 Sec. 22 Twp. 17 S. R. 22 East West County: Miami

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: GammaRay/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum GammaRay
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CASING RECORD <input checked="" type="checkbox"/> New <input 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	7	10	20	Portland	3	50/50 POZ
Completion	5.6250	2.8750	8	375	Portland	70	50/50 POZ

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	339-349	2 DML RTG	10

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. _____		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

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

TICKET NUMBER 39857
LOCATION Ottawa KS
FOREMAN Fred Masler

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6/4/12	4015	ABC # I-5	SW 22	17	22	MI
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
JTC Oil Inc			506	FREMAO	Safety	MJ
MAILING ADDRESS			495	HARBEC	NA	
35688 Plum Creek Rd			369	DERMAS	DM	
CITY	STATE	ZIP CODE	503	DANGAR	DG	
Oswatimie	KS	66064				

JOB TYPE Long string HOLE SIZE 6 HOLE DEPTH 400' CASING SIZE & WEIGHT 2 3/8 EUE
 CASING DEPTH 375' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/ok _____ CEMENT LEFT IN CASING 2 1/2" plug
 DISPLACEMENT 2.2 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish pump valve. Mix & Pump 100# Gal Flush Mix + Pump
50/50 For mix cement 2% cel. Cement to surface.
Flush pump & lines clean. Displace 2 1/2" plug to casing TD.
Pressure to 800# PSI. Hold & monitor pressure for 30 min
MIT. Release pressure to set float valve. Shut in casing

KCC Rep: Taylor Herman
JTC Drilling

Fred Masler

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	485	1030 ⁰⁰
5406	-	MILEAGE		N/C
5402	375	Casing footage		N/C
5407	1/3 Minimum	Ton Miles	503	116 ⁶⁷
5502c	1 hr	80 BBL Vac Truck	369	91 ⁰⁰
1124	70 sks	50/50 For Mix Cement		766 ⁵⁰
1158	218#	Premium		45 ²⁸
4402	1	2 1/2" Rubber plug		28 ⁰⁰
			7.58%	SALES TAX
				ESTIMATED TOTAL
				2140 ³⁹

Revin 3737

AUTHORIZATION [Signature]

TITLE _____ 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

ABC J-5

JTC Oil, Inc.

Drillers Log

Well Name ABC I-5

API# 15 15-121-29017-00-00 Cement Amounts
Surface Date 5/19/12 3 Sacks

Cement Date 5/31/12

Well Depth 417

Casing Depth 372.65

Drillers Log

<u>Formation</u>	<u>Depth</u>	<u>Formation</u>	<u>Depth</u>
top soil	0-5		
lime	5		
shale	20		
lime	21		
shale	25		
mix	31		
shale	33		
lime	45		
shale	62		
lime	90		
mix	91		
lime	92		
shale	96		
mix	100		
lime	102		
shale	107		
lime	110		
mix	125		
lime	126		
mix	138		
lime	140		
shale	141		
lime	145		
shale	150		
coal	172		
lime	174		
shale	177		
mix	180		
lime	181		
shale	185		
lime	275		
shale	280		
red bed	308		

top oil sand	335-337 35%
	337-339 75%
	339-341 100%
	341-343 100%
	343-345 100%
	345-347 100%
	347-349 100%
	349-351 75%
	351-353 10%
	353-355 lime
shale	360
stop drilling	417
casing pipe	372.65