

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1085160

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 # 34008	API No. 15
Name: Owens Petroleum LLC	
Address 1: 1274 202ND RD	SE_NW_NE_NW_Sec13 Twp24 S. R. 15 East West
Address 2: City: YATES CENTER	4785 Feet from North / South Line of Section 3495 Feet from East / [] West Line of Section
CONTRACTOR: License # 33986	Modern
Name: Owens Petroleum Services, LLC	Lease Name: Eagle Well #: 37
Wellsite Geologist: none	
Purchaser:	2
Designate Type of Completion:	Elevation: Ground: 1111 Kelly Bushing: _0
✓ New Well Re-Entry Workover	Total Depth: 1165 Plug Back Total Depth:
Gas D&A ENHR SIGW Gos GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: 40 Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: 0 feet depth to: 1165 w/ 164 sx cmt.
Operator:	
Vell Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Original Total Depth: Conv. to SW [] Conv. to GSW	Chloride content: 0 ppm Fluid valume: 30 bbb
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name: 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Dual Completion Permit #:	Lance Name: BODERS
] ENHR Permit #:	0
] GSW Permit #:	- Mondon
05/09/2012 05/15/2012 06/15/2012	
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 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: Deans Carrison Date: 06/25/2012

Side Two



Operator Name: Owe	ns Petroleum I	_LC	Lease Name:	Eagle		Well #: 37	
Sec. 13 Twp.24	s. R. <u>15</u>	_ ☑ East ☐ West	County: Woo	odson	· ·	- - · ·	ü
me tool open and clos	sed, flowing and shape if gas to surface if	and base of formations pe nut-in pressures, whether lest, along with final char al well site report.	shut-in pressure rea	ached static leve	l, hydrostatic pres	ssures, bottom ho	le temperature, flu
Orill Stem Tests Taken (Attach Additional Si	heets)	Yes [✓] No		Log Formati	on (Top), Depth a	nd Datum	[] Sample
Samples Sent to Geolo	ogical Survey	☐ Yes ☑ No	Nar	me		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)		Yes No Yes No	. na ! !				
ist All E. Logs Run:			i į				
			G RECORD N	lew Used	ction, etc.	••	
Purpose of String	Size Hote Dritted	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	11.625	7	17	40	Portland	20	
Production	5.875	2.875	6.5	1154	Pozmix	164	
		•	- -	İ			
	Ţ	ADDITIONA	L_CEMENTING / SQ	UEEZE RECORD) 	•	
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and	Percent Additives	
Protect Casing Plug Back TO Plug Off Zone	-		† · · · ·		-	-	
Shots Per Foot		TION RECORD - Bridge Plu Footage of Each Interval Pe		Acid, Fra	acture, Shot, Cemer Amount and Kind of M	nt Squeeze Record	Depth
. 4							+
+		-	-	-			+
				 			- +
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run;	Yes [] No	 o	•
Date of First, Resumed P	roduction, SWD or E	NHR. Producing Me		Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wa			Gas-Oil Ratio	Gravity
DISPOSITION	N OF GAS		METHOD OF COMPL	ETION:		PROPRETE	· · ·
Vented [] Sold	Used on Lease	11-	Perf. Dua!	y Comp Co	mmingled	PRODUCTION	INTERVAL:
(If vented, Subп	nit ACO-18.)	Other (Specify)					

Invoice # Page 33949 001 Invoice Date 05-09-2012 08:18:20

True Enterprise 1326 North Main Street LeRoy, KS 66857

(620) 964-2514

SOLD TO:

Scott Owens Scott Owens 1274 202 Road

Yates Center, KS 66783

620-625-3607

Please Remit To: True Enterprise, 1326 North Main, LeRoy, KS 66857

Terms	P.O.#	Order #	Туре	Sld.By	Cust.#	Slm.	
10th Next Month	Eagle 37	33949	House	SLT	O36070	Store	
<u> </u>	Item #	<u> </u>	Description		000070	Price	
20.000 EA CL203	PO	RTLAND CEN	MENT		- ;	10.00	Extended Price 200.00
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Comment:						axable:	200,00
						ax: lon-Tax:	14.60
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1 '	25 h					otal:	214.60
Received by: Trans	, ,			bryson	owens		214.00

FED ID#

Shop # (620) 437-2661 Cellular # (620) 437-7582

Office # (316) 303-9515 (316) 263-0432 Office Fax #

Hurricane Services, Inc.

Cementing & Circulating Division 250 N. Water, Suite 200 Wichita, KS 67202

MC ID#

165290

Shop Address: 3613A Y Road

Madison, KS 66860

Customer:

OWENS PETROLEUM 1274 202ND ROAD

YATES CENTER, KS 66783

Invoice Date: Invoice #: 5/20/2012 0007079

Lease Name:

EAGLE

Well #:

37

County:

WOODSON

Date/Description	HRS/QTY	Rate	Total
5/16/12 - See attached work ticket #100092 per BB	1.00	790 00	790 00
Pump truck mileage one way #201	35.00	3.25	113 75
70/30 Pozmix cement	164.00	11.40	1,869 60 4
Gel 2%	288.00	0.30	86 40 1
Flocele	50.00	1.85	92.50 1
Gel flush ahead	200.00	0.30	60.00 1
Water truck #104	3.00	84.00	252.00
Pickup truck mileage one way #290	35.00	1,50	52.50
Hulk truck #203	7.49	40.25	301.47
Top rubber plugs 2 7/8"	2.00	25.00	50.00 T
5% Fuel surcharge	1.00	183.40	183.40 T

Net Invoice 3,851.62 Sales Tax: (7.30%) 170.96 4,022.58 Total _

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!