

KANSAS CORPORATION COMMISSION 1087849
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 34383
Name: Rickerson, James dba Randi Oil Co.
Address 1: 212 W. GARFIELD
Address 2: _____
City: IOLA State: KS Zip: 66749 + _____
Contact Person: Jim Rickerson
Phone: (316) 363-4556
CONTRACTOR: License # 33977
Name: E K Energy LLC
Wellsite Geologist: n/a
Purchaser: n/a
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 #: _____

06/16/2012	06/19/2012	06/19/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30431-00-00
Spot Description: _____
NE SW SE SE Sec. 14 Twp. 24 S. R. 19 ☒ East ☐ West
495 Feet from ☐ North / ☒ South Line of Section
845 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW
County: Allen
Lease Name: HICKS Well #: 1
Field Name: Iola
Producing Formation: Tucker
Elevation: Ground: 1050 Kelly Bushing: 1050
Total Depth: 1000 Plug Back Total Depth: 1000
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: 1050
feet depth to: 0 w/ 60 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 Gernick Date: 07/25/2012

Operator Name: Rickerson, James dba Randi Oil Co. Lease Name: HICKS Well #: 1
Sec. 14 Twp. 24 S. R. 19 ☒ East ☐ West County: Allen

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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	☐ Yes ☒ No	☒ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes ☒ No	Name	Top	Datum
Cores Taken	☐ Yes ☒ No	lime	654	
Electric Log Run	☐ Yes ☒ No	shale	995	
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	☐ Yes ☐ No	mississippi chat	1000	
List All E. Logs Run:				

CASING RECORD ☒ New ☐ 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	9.875	7	15	10	Oil Well	60	
production	5.625	2.875	15	1000		60	

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: ☒ Yes ☐ No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain) _____

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS:		METHOD OF COMPLETION:		PRODUCTION INTERVAL:
Vented	Sold	Used on Lease	☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled	
(If vented, Submit ACO-18.)			☐ Other (Specify) _____ (Submit ACO-5) (Submit ACO-4)	

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

DRILLERS LOG

Company: RANDI OIL CO.

Contractor: EK Energy LLC

License# 33977

Farm: HICKS

County: Allen

Well No: 1

Sec: 140 TWP: 24 Range: 19E

API: 15-001-30431-00-00

Location: 495 FNL

Surface Pipe: 21'

Location: 845 FEL

Spot: NE 1/4

[illegible]

Lone Jack Oil Company
509 East Walnut
Blue Mound, KS 66010

Invoice

Date	Invoice #
6/23/2012	1476

Bill To
Jim Rickerson Box 3 Iola, KS 66749

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
	Hicks Lease		
3	6/20/12, Well #1, ran 1 inch in well to TD, pumped 10 sacks, pulled up to 500 feet, pumped 10 sacks, pulled up to 200 feet and pumped remaining 40 sacks to surface.	85.00	255.00T
1	pump charge	300.00	300.00T
1	water truck	100.00	100.00T
	Sales Tax	7.55%	49.45
Thank you for your business.		Total	\$704.45

21 ck-11054