

KANSAS CORPORATION COMMISSION 1088466
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 # 33924
Name: ABARTA Oil & Gas Co., Inc.
Address 1: 1000 GAMMA DR STE 400
Address 2: _____
City: PITTSBURGH State: PA Zip: 15238 + 2926
Contact Person: Ken Fleeman
Phone: (412) 963-6443
CONTRACTOR: License # 33905
Name: Royal Drilling Inc
Wellsite Geologist: James C. Musgrove
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: Charer Energy
Well Name: Popp-Harms Unit #1
Original Comp. Date: 7/06/2010 Original Total Depth: 3420
☐ 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 #: _____

03/04/2011 03/31/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-009-25382-00-01
Spot Description: _____
NE NE NW NE Sec. 5 Twp. 16 S. R. 13 ☐ East ☒ West
5280 Feet from ☐ North / ☒ South Line of Section
1400 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☒ SE ☐ SW
County: Barton
Lease Name: Popp-Harms Well #: 1
Field Name: _____
Producing Formation: Arbuckle
Elevation: Ground: 1900 Kelly Bushing: 1905
Total Depth: 3515 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 411 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: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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 Gertson Date: 07/31/2012

1088466

Operator Name: ABARTA Oil & Gas Co., Inc. Lease Name: Popp-Harms Well #: 1
 Sec. 5 Twp. 16 S. R. 13 ☐ East ☒ West County: Barton

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)	☐ Yes ☒ No	☒ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes ☒ No	Name	Top	Datum
Cores Taken	☐ Yes ☒ No	Anhydrite	872	+1033
Electric Log Run	☐ Yes ☒ No	Topeka	2774	-869
Electric Log Submitted Electronically (If no, Submit Copy)	☐ Yes ☒ No	Heebner	3006	-1101
		Toronto	3023	-1118
		Douglas	3037	-1132
		Lansing	3079	-1174
		Arbuckle	3338	-1433

List All E. Logs Run:
Attached

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	12.25	8.625	23	411	Common	185	3%cc, 2% gel
Production	7.875	5.5	15.5	3403	AS-2	175	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
☐ Perforate				
☐ Protect Casing	3343-3347	Common	25	Common w/fluidloss additive
☐ Plug Back TD				
☒ Plug Off Zone	3350-3352	Common	25	tailed by common neat

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
4	3344-48	Swab down, no fluid. Acid 250 gal. swab 30bph @ 1/2-1% oil. Squeeze perfs. w 50% common	
4	3343-47 & 3350-52	Swab down, very little fluid w/ trace of oil. Acid 250 gal soak job. Swab 22bph w/trace of oil. Squeeze perfs.	
4	Perf thru acid- double shoot 3343-47 & 3342.5-46.5	spot 200 gal acid & set over nite. Acid gone, swab test 10bph w/trace of oil	
1	3465-3515	1000gal 28% acid	

TUBING RECORD:		Size: 2 7/8 x 5 1/2	Set At: 3374	Packer At: 3374	Liner Run: ☐ Yes ☒ No
Date of First, Resumed Production, SWD or ENHR. 5/05/2011		Producing Method: ☐ Flowing ☐ Pumping ☐ Gas Lift ☒ Other (Explain) <u>SWD Well</u>			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease (If vented, Submit ACO-18.)		METHOD OF COMPLETION: ☒ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled (Submit ACO-5) (Submit ACO-4) ☐ Other (Specify) _____		PRODUCTION INTERVAL: _____ _____	
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Form	ACO1 - Well Completion
Operator	ABARTA Oil & Gas Co., Inc.
Well Name	Popp-Harms 1
Doc ID	1088466

All Electric Logs Run

Comp. Density Neutron
Micro
Dual Injection
Sonic