



KANSAS CORPORATION COMMISSION 1088940
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 # 32711
Name: Becker, Mike
Address 1: 15135 BROADMOOR
Address 2: _____
City: STANLEY State: KS Zip: 66223 + 3111
Contact Person: Mike Becker
Phone: (913) 271-7631
CONTRACTOR: License # 32711
Name: Becker, Mike
Wellsite Geologist: n/a
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 #: _____

06/13/2012	06/14/2012	06/18/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-011-23994-00-00

Spot Description: _____
NW NW SE NE Sec. 26 Twp. 25 S. R. 21 East West
3805 Feet from North / South Line of Section
1160 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Bourbon

Lease Name: Lord Well #: 1

Field Name: _____

Producing Formation: Mississippi

Elevation: Ground: 1052 Kelly Bushing: 1055

Total Depth: 869 Plug Back Total Depth: 869

Amount of Surface Pipe Set and Cemented at: 21 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: 200 bbbls

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 Gantico Date: 08/02/2012



1088940

Operator Name: Becker, Mike Lease Name: Lord Well #: 1
 Sec. 26 Twp. 25 S. R. 21 East West County: Bourbon

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Mississippian</td> <td>856</td> <td>865</td> </tr> <tr> <td>Mississippi break/Oil show</td> <td>865</td> <td>869</td> </tr> </table>	Name	Top	Datum	Mississippian	856	865	Mississippi break/Oil show	865	869
Name	Top	Datum								
Mississippian	856	865								
Mississippi break/Oil show	865	869								

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	5.875	7	14	20	Portland	5	
Longstring	5.875	3	9	858.59	Portland	80	

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
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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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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McGown Drilling, Inc.
Mound City, Kansas

Operator:
Mike Becker
Stanley, Kansas

Lord #1
Bourbon Co., KS
26-25S-21E
API: 011-23994

Spud Date: 6/13/2012
Surface Casing: 7"
Surface Length: 21.30'
Surface Cement: 5 sx

Surface Bit: 11"
Drill Bit: 5.875"
Longstring: 858.50'
Longstring Date: 6/15/2012

Driller's Log

Top	Bottom	Formation	Comments
0	5	Soil & Clay	
5	22	Lime	
22	48	Sand	
48	130	Lime	
130	134	Bl. Shale	
134	137	Lime	
137	159	Shale	
159	178	Lime	
178	291	Big Shale	
291	292	Lime	
292	298	Shale	
298	299	Lime	
299	316	Shale	
316	319	Lime	
319	383	Shale	
383	424	Lime	
424	468	Shale	
468	484	Lime	20'
484	491	Bl. Shale & Shale	
491	496	Lime	5'
496	499	Bl. Shale	
499	543	Shale	
543	546	Sand	Grey
546	569	Shale	
569	572	Sand	Hard, grey

Lord #1
Bourbon Co., KS

572	587	Shale	
587	588	Lime	
588	590	Shale	
590	592	Bl. Shale	
592	605	Shale	
605	606	Lime	Hard
606	614	Shale	
614	615	Coal	
615	620	Shale	
620	621	Coal	
621	634	Shale	
634	639	Sand	Oil show
639	651	Shale	
651	656	Sand	Grey, sandy shale
656	669	Shale	
669	674	Sandy Shale	Some sand
674	696	Shale	
696	707	Sand	Odor
707	708	Coal	
708	734	Shale	
734	737	Sand / Sandy Shale	
737	760	Shale	
760	761	Coal	
761	786	Shale	
786	791	Sand	Laminated
791	795	Shale	
795	796	Coal	
796	848	Shale	
848	850	Coal	
850	856	Shale	
856	865	Lime	Mississippian
865	869	Miss Break	Oil show
869		TD	

DIEBOLT LUMBER AND SUPPLY INC.

2661 Nebraska Road
 La Harpe, Kansas 66751
 FAX: (620) 496-2226
 PHONE: (620) 496-2222



CUST NO: *5 JOB NO: 000 PURCHASE ORDER: REFERENCE: TERMS: CASH/CHECK/BANKCARD CLERK: AC DATE/TIME: 6/18/12 9:34
 SOLD TO: **** CASH **** SHIP TO: TIMBERCREEK ENERGY TERMINAL: 552
 SALESPERSON: AC ART CHAPMAN TAX: 001 KANSAS TAX

INVOICE: J34408

LINE	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	LOCATION	UNITS	PRICE/ PER	EXTENSION
1	60	60	BG	94PC	94# TYPE I PORTLAND CEMENT	2	60	9.65 /BG	579.00 *
2						2			
3	1	1	EA	80	FUEL SURCHARGE	S/O	1	10.00 /EA	10.00 *
4					DEL TO BRONSON GO SOUTH 4 MILES	S/O			
5					ON 5000 ROAD LEFT SIDE OF ROAD.	S/O			
6					CEMENTING IN WELL	S/O			

913-271-7671
Mike Beckler

** PAID IN FULL **

633.47

TAXABLE 589.00
 NON-TAXABLE 0.00
 SUBTOTAL 589.00

TAX AMOUNT 44.47

633.47

TOTAL 633.47



TOT WT: 5640.00
 MID: 962000002764

BANKCARD PAYMENT
 BKCRD# XXXXXXXXXXXXX6117

APP: 193354 XR: 934408

Mike Beckler
 Received By

DIEBOLT LUMBER AND SUPPLY INC.

2661 Nebraska Road
 La Harpe, Kansas 66751
 FAX: (620) 496-2226
 PHONE: (620) 496-2222



CUST NO: 5 JOB NO: 000 PURCHASE ORDER: REFERENCE: TERMS: CASH/CHECK/BANKCARD CLERK: AC DATE/TIME: 8/18/12 9:34
 SOLD TO: **** CASH **** SHIP TO: TIMBERCREEK ENERGY TERMINAL: 552

SALESPERSON: AC ART CHAPMAN
 TAX: 001 KANSAS TAX

INVOICE: J34408

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** PAID IN FULL **

633.47 TAXABLE 589.00
 NON-TAXABLE 0.00
 SUBTOTAL 589.00

TAX AMOUNT 44.47



BANKCARD PAYMENT
 BKCRD# XXXXXXXXXXXXX6117

633.47 **TOTAL 633.47**

TOT WT: 5640.00
 MID: 962000002764

APP: 193354 XR: 934408

Mark Bush
 Received By

M...