



KANSAS CORPORATION COMMISSION 1090872
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 # 31486
Name: Horton, Jack
Address 1: PO BOX 97
Address 2: _____
City: SEDAN State: KS Zip: 67361 + 0097
Contact Person: Jack Horton
Phone: (620) 249-4476
CONTRACTOR: License # 34133
Name: Southwinds Energy LLC
Wellsite Geologist: Fred Jones
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 #: _____

| | | |
|-----------------------------------|------------------|---|
| <u>5/21/2012</u> | <u>5/30/2012</u> | <u>8/15/2012</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-019-27194-00-00

Spot Description: _____

NE SW SE Sec. 21 Twp. 33 S. R. 10 East West
990 Feet from North / South Line of Section
1650 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Chautauqua

Lease Name: Campbell Well #: 4

Field Name: Leniton

Producing Formation: Wayside

Elevation: Ground: 1050 Kelly Bushing: 1054

Total Depth: 1521 Plug Back Total Depth: _____

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: 1501 w/ 160 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 300 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 Gerrick Date: 08/22/2012



1090872

Operator Name: Horton, Jack Lease Name: Campbell Well #: 4
 Sec. 21 Twp. 33 S. R. 10 East West County: Chautauqua

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: Gamma Ray Neutron | <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>Wayside</td> <td>1442</td> <td>-392</td> </tr> </table> | Name | Top | Datum | Wayside | 1442 | -392 |
| Name | Top | Datum | | | | | |
| Wayside | 1442 | -392 | | | | | |

| CASING RECORD <input type="checkbox"/> New <input checked="" 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 | 12.25 | 8.625 | 24 | 40 | Portland | 8 | |
| Longstring | 6.75 | 4.5 | 11.6 | 1501 | Thickset | 160 | |
| | | | | | | | |

| ADDITIONAL CEMENTING / SQUEEZE RECORD | | | | |
|---|------------------|----------------|--------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate | | | | |
| <input type="checkbox"/> Protect Casing | | | | |
| <input type="checkbox"/> Plug Back TD | | | | |
| <input type="checkbox"/> 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 |
|----------------|---|---|-----------|
| 2 | 1480-1486 | 8000lbs sand | 1480-1486 |
| | | | |
| | | | |
| | | | |

| | | |
|--|-----------|--|
| TUBING RECORD: Size: <u>2.375</u> Set At: <u>1480</u> Packer At: _____ | | Liner Run: <input type="checkbox"/> Yes <input checked="" 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 checked="" 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: <u>1480</u> <u>1486</u> |
|---|---|--|



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 34699
LOCATION Fureka, KS
FOREMAN Shannon Feck

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

FIELD TICKET & TREATMENT REPORT
CEMENT API # 15-019-2774

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|---------------------------------------|------------|--------------------|------------|----------------|------------------------------|--------|
| 5-31-12 | | Campbell #4 | 21 | 33S | 10E | CD |
| CUSTOMER <u>Jack Horton</u> | | | TRUCK # | DRIVER | TRUCK # | DRIVER |
| MAILING ADDRESS <u>P.O. Box 97</u> | | | <u>445</u> | <u>Dave G</u> | <u>Interway Trucking #21</u> | |
| CITY <u>Sedan</u> | | | <u>667</u> | <u>Chris B</u> | | |
| STATE <u>KS</u> | | | <u>637</u> | <u>Tom M</u> | | |
| ZIP CODE <u>67361</u> | | | | | | |

JOB TYPE Logging HOLE SIZE 6 7/8" HOLE DEPTH 1521' CASING SIZE & WEIGHT 4 1/2" 11.1#
 CASING DEPTH 1501' DRILL PIPE --- TUBING --- OTHER ---
 SLURRY WEIGHT 13.6# SLURRY VOL 57 WATER gal/sk 90 CEMENT LEFT in CASING 0.00#
 DISPLACEMENT 23 1/2 DISPLACEMENT PSI 700 MIX PSI Surf Plug 1200 RATE 5 BPM

REMARKS: Safety Meeting, Rig up to 4 1/2 casing, Break circulation w/ 10 Bbl water, mixed 400# gal flush w/ Halls, 3 Bbl Spacer, mixed 160 sks Thickset cement with 5# kal-sol/sk, & 1# phenosol/sk. Shut down wash out pump & lines & displace with 23.5 Bbl water. Final pumping pressure at 800psi, bumped plug to 1200psi. Flood & plug hold good. Good circulation @ all times 7 Bbl Slurry to pit. Job complete.
" Thank's Shannon & Crew "

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|---------------|-------------------|--------------------------------------|----------------|-------------------------|
| 5401 | 1 | PUMP CHARGE | 1030.00 | 1030.00 |
| 5406 | 50 | MILEAGE | 4.00 | 200.00 |
| 126A | 160 sks | Thick Set Cement | 19.24 | 3077.00 |
| 1110A | 800 # | kal-sol @ 5#/sk | .46 | 368.00 |
| 1107A | 160 # | phenosol @ 1#/sk | 1.79 | 286.40 |
| 1119B | 400 # | Gal flush | .21 | 84.00 |
| 1105 | 45 # | Halls | .44 | 19.80 |
| 5407A | 5.8 hrs | 700 mileage bulk Truck | 1.34 | 587.60 |
| 5507C | 4 hrs | 50 Bbl Water Truck | 70.00 | 280.00 |
| 5507B | 4 hrs | 50 Bbl Vac Truck (Interway Trucking) | 80.00 | 320.00 |
| 473 | 3000 gal | City water | 16.50/1000 gal | 49.50 |
| 4404 | 1 | 1/2" Top Rubber Plug | 45.00 | 45.00 |
| Total 6703.41 | | | | |
| -5% 335.17 | | | 1112 | SubTotal 6368.23 |
| | | | 7.7% | SALES TAX 317.11 |
| | | | | ESTIMATED TOTAL 6703.41 |

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