KANSAS CORPORATION COMMISSION 1090450
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 # 6142
Name: Town Oil Company Inc.
Address 1: 16205 W 287TH ST
Address 2:
City: PAOLA State: KS Zip: 66071 + 8482
Contact Person: Lester Town
Phone: ( 913 ) 294-2125
CONTRACTOR: License # 6142
Name: Town Oil Company Inc.
Wellsite Geologist: NA
Purchaser:

Designate Type of Completion:

- [x] New Well
- [ ] Re-Entry
- [ ] Workover

- [ ] Oil
- [ ] WSW
- [ ] SWD
- [ ] SIOW
- [ ] Gas
- [ ] D&A
- [x] 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 #:

| 6/12/2012 | 6/15/2012 | 8/10/2012 |
|---|---|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-107-24576-00-00
Spot Description:
E2 - SE - SE - NW Sec. 27 Twp. 19 S. R. 22 [x] East [ ] West
2970 Feet from [ ] North / [x] South Line of Section
2940 Feet from [x] East / [ ] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[ ] NE [ ] NW [x] SE [ ] SW
County: Linn
Lease Name: McDonald Well #: 8-WR
Field Name: Goodrich-Parker
Producing Formation: Cattleman
Elevation: Ground: 990 Kelly Bushing: 0
Total Depth: 720 Plug Back Total Depth: 14
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? [ ] Yes [x] No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 20 w/ 3 sx cmt.

**Drilling Fluid Management Plan**
*(Data must be collected from the Reserve Pit)*

Chloride content: 1500 ppm Fluid volume: 80 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:
- [x] Wireline Log Received
- [ ] Geologist Report Received
- [x] UIC Distribution

ALT [ ] I [x] II [ ] III Approved by: Deanna Gomez Date: 08/16/2012

Side Two

1090450

Operator Name: Town Oil Company Inc. Lease Name: McDonald Well #: 8-WR

Sec. 27 Twp. 19 S. R. 22 ☑ East ☐ West County: Linn

**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 ☐ Yes ☑ No
*(Attach Additional Sheets)*

Samples Sent to Geological Survey ☐ Yes ☑ No

Cores Taken ☐ Yes ☑ No

Electric Log Run ☑ Yes ☐ No

Electric Log Submitted Electronically ☑ Yes ☐ No
*(If no, Submit Copy)*

List All E. Logs Run:

Gamma Ray Neutron Completion Log

☑ Log Formation (Top), Depth and Datum ☐ Sample

| Name | Top | Datum |
|---|---|---|
| Gamma Ray | | |

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 | 6.2500 | 10 | 20 | Portland | 3 | 50/50 POZ |
| Completion | 5.6250 | 2.8750 | 8 | 706 | Portland | 93 | 50/50 POZ |
| | | | | | | | |

ADDITIONAL CEMENTING / SQUEEZE RECORD

| Purpose: ___ Perforate ___ Protect Casing ___ Plug Back TD ___ Plug Off Zone | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
|---|---|---|---|---|
| | - | | | |
| | - | | | |

| 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 | 654.0-658.0 17 Perfs | Acid 500 gal. 7.5% HCL | |
| | | | |
| | | | |
| | | | |
| | | | |

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 |
|---|---|---|---|---|---|
| | | | | | |

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. *(Submit ACO-5)* ☐ Commingled *(Submit ACO-4)* ☐ Other *(Specify)*

PRODUCTION INTERVAL:

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

Linn County, KS
Well: McDonald 8-WR
Lease Owner: TOC

**Town Oilfield Service, Inc.**
(913) 837-8400

Commenced Spudding:
6/12/2012

WELL LOG

| Thickness of Strata | Formation | Total Depth |
|---|---|---|
| 6 | Soil and Rocks | 6 |
| 2 | Clay | 8 |
| 32 | Sandy Shale | 40 |
| 3 | Lime | 43 |
| 47 | Shale | 90 |
| 9 | Lime | 99 |
| 9 | Shale | 108 |
| 36 | Lime | 144 |
| 7 | Slate and Shale | 151 |
| 24 | Lime | 175 |
| 4 | Slate and Shale | 179 |
| 2 | Lime | 181 |
| 2 | Slate and Shale | 183 |
| 7 | Lime | 190 |
| 117 | Slate and Shale | 307 |
| 9 | Sandy Shale | 316 |
| 28 | Shale | 344 |
| 5 | Lime | 349 |
| 14 | Shale | 363 |
| 12 | Lime with Shale | 375 |
| 10 | Shale | 385 |
| 11 | Sand | 396 |
| 34 | Shale | 430 |
| 11 | Lime | 441 |
| 9 | Shale | 450 |
| 3 | Lime | 453 |
| 21 | Shale | 474 |
| 23 | Lime | 497 |
| 3 | Shale | 500 |
| 2 | Lime | 502 |
| 5 | Shale | 507 |
| 4 | Lime | 511 |
| 71 | Shale | 582 |
| 7 | Sand | 589 |
| 69 | Sandy Shale | 658 |
| 4 | Sand | 662 |
| 58 | Sandy Shale | 720-TD |
| | | |
| | | |
| | | |

**CONSOLIDATED**
Oil Well Services, LLC

TICKET NUMBER 39591
LOCATION Ottawa, KS
FOREMAN Casey Kennedy

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

# FIELD TICKET & TREATMENT REPORT
## CEMENT

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|---|---|---|---|---|---|---|
| 6/15/12 | 7823 | McDonald #8-WR | NE 27 | 19 | 22 | LN |

CUSTOMER: Town Oil Company
MAILING ADDRESS: 16205 W. 287th St
CITY: Paola | STATE: KS | ZIP CODE: 66071

| TRUCK # | DRIVER | TRUCK # | DRIVER |
|---|---|---|---|
| 481 | Carlen | ck | |
| 666 | KeiCar | KC | |
| 510 | SetTuc | ST | |
| | | | |

JOB TYPE Longstring | HOLE SIZE 5 5/8" | HOLE DEPTH 720' | CASING SIZE & WEIGHT 2 3/8" EUE
CASING DEPTH 711' | DRILL PIPE | TUBING | OTHER pin - 706'
SLURRY WEIGHT | SLURRY VOL | WATER gal/sk | CEMENT LEFT in CASING 2½" plug
DISPLACEMENT 4.1 bbls | DISPLACEMENT PSI | MIX PSI | RATE 4 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 100 # Premium Gel followed by 10 bbls fresh water, mixed & pumped 93 sks 50/50 Pozmix cement w/ 2% gel per sk, cement to surface, flushed pump clean, pumped 2½" rubber plug to pin w/ 4.1 bbls fresh water, pressured to 800 PSI, well held pressure for 30 min MIT, shut in casing.

| ACCOUNT CODE | QUANITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|---|---|---|---|---|
| 5401 | 1 | PUMP CHARGE | | 1030.00 |
| 5406 | 40 mi | MILEAGE | | 160.00 |
| 5402 | 711' | casing footage | | — |
| 5407 | minimum | ton mileage | | 350.00 |
| | | | | |
| | | | | |
| 1124 | 93 sks | 50/50 Pozmix cement | | 1018.35 |
| 1118B | 256 # | Premium Gel | | 53.76 |
| 4402 | 1 | 2½" rubber plug | | 28.00 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | 6.3% | SALES TAX | 69.31 |
| | | | ESTIMATED TOTAL | 2709.42 |

Ravin 3737

AUTHORIZTION Scott Rilland | TITLE 250654 | 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.