



KANSAS CORPORATION COMMISSION 1092453
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 # 4567
Name: D. E. Exploration, Inc.
Address 1: PO BOX 128
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 0128
Contact Person: PHIL FRICK
Phone: (785) 883-4057
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: NONE
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 #:

05/17/2012 05/18/2012 05/18/2012

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-121-29063-00-00

Spot Description:

NE SW NW NE Sec. 4 Twp. 19 S. R. 24 ☒ East ☐ West
4455 Feet from ☐ North / ☒ South Line of Section
2095 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Miami

Lease Name: Garberg Well #: AI-12

Field Name: BLACK

Producing Formation: SQUIRREL

Elevation: Ground: 817 Kelly Bushing: 817

Total Depth: 460 Plug Back Total Depth: 413

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: 444

feet depth to: 0 w/ 63 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 20 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 Garrisor Date: 09/06/2012



1092453

Operator Name: D. E. Exploration, Inc. Lease Name: Garberg Well #: AI-12
 Sec. 4 Twp. 19 S. R. 24 ☒ East ☐ West County: Miami

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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey ☐ Yes ☒ No Cores Taken ☐ Yes ☒ No Electric Log Run ☒ Yes ☐ No Electric Log Submitted Electronically ☒ Yes ☐ No <i>(If no, Submit Copy)</i> List All E. Logs Run: GAMMA RAY/NEUTRON/CCL	☒ Log Formation (Top), Depth and Datum ☐ Sample <table style="width: 100%;"> <tr> <td style="width: 50%;">Name</td> <td style="width: 25%;">Top</td> <td style="width: 25%;">Datum</td> </tr> <tr> <td>SQUIRREL</td> <td>354</td> <td>+463</td> </tr> </table>	Name	Top	Datum	SQUIRREL	354	+463
Name	Top	Datum					
SQUIRREL	354	+463					

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	20	40	PORTLAND	5	NA
PRODUCTION	5.625	2.875	6	444	50/50 POZ	63	SEE TICKET

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
3	354-370 - 50 PERFS - 2" DML RTG		

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 <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> ☐ Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Commenced Spudding:
5/17/2012

[illegible]

Short Cuts

TANK CAPACITY

BBLs. (42 gal.) equals $D^2 \times .14 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

* D - Diameter of Pump Sheave

* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

BELT LENGTH - $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS: $\frac{WATTS}{VOLTS} = AMPS$

746 WATTS equal 1 HP

Log Book

Well No. AI-12

Farm Garberg

KS Miami
(State) (County)

4 19 24
(Section) (Township) (Range)

For D.E. Exploration
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East
Louisburg, KS 66053
913-710-5400

KS State; Well No. AI-12

Elevation 017

Commenced Spuding May 11 2012

Finished Drilling May 17 2012

Driller's Name Wesley Dilligard

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Brandon Stone

Tool Dresser's Name Loft Stone

Tool Dresser's Name _____

Contractor's Name POS

4 19 14

(Section) (Township) (Range)

Distance from 2 line 4433 ft.

Distance from E line 2095 ft.

5 sacks

6 hrs

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____

8" Set _____ 8" Pulled _____

7 8/4" Set 40 6 1/4" Pulled

4" Set _____ 4" Pulled _____

2" Set _____ 2" Pulled _____

10" Pulled _____

8" Pulled _____

6 1/4" Pulled _____

4" Pulled _____

2" Pulled _____

CASING AND TUBING MEASUREMENTS

[illegible]

Thickness of Strata	Formation	Total Depth	Remarks
0-21	Soil-clay	21	
6	gravel	26	water
128	Shale	154	
14	shale & lime	168	
17	sand	185	no Oil
1	sand	186	Oil - good bleed - no Oil
1	sand	187	no Oil
5	Lime	192	
7	shale	199	
5	Lime	204	
8	shale	212	
7	Lime	219	
16	shale	235	
4	Lime	239	
6	shale	245	
6	sand	251	
4	shale	255	
16	Lime	271	
12	shale	283	
2	Lime	285	
16	shale	301	
4	Lime	305	
44	shale	349	
4	sandy shale	353	
1	sand	354	50% Oil > perf
1	sand	355	Solid Oil >
4	sand	359	no Oil

359

[illegible]



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 250036

Invoice Date: 05/22/2012 Terms: 0/0/30,n/30

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D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

GARBERG AI-12
39745
4-19-24
05-18-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	63.00	10.9500	689.85
1118B	PREMIUM GEL / BENTONITE	206.00	.2100	43.26
1111	SODIUM CHLORIDE (GRANULA	122.00	.3700	45.14
1110A	KOL SEAL (50# BAG)	315.00	.4600	144.90
1401	HE 100 POLYMER	.50	47.2500	23.63
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	1030.00	1030.00
368 EQUIPMENT MILEAGE (ONE WAY)	40.00	4.00	160.00
368 CASING FOOTAGE	443.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00
503 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 974.78 Freight: .00 Tax: 73.59 AR 2813.37
Labor: .00 Misc: .00 Total: 2813.37
Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914



FIELD TICKET & TREATMENT REPORT CEMENT

TICKET NUMBER 39745
LOCATION Ottawa
FOREMAN Alan Mader

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
5-18-12	2955	Garberg AI-12		12W4	19	24	MI
CUSTOMER DE Exploration							
MAILING ADDRESS P.O. Box 128							
CITY Wellsville		STATE KS	ZIP CODE 66092				

TRUCK #	DRIVER	TRUCK #	DRIVER
516	Ala Mad	Safety	Meo
268	Ant Mad	AKM	
370	Ke Car	RC	
503	Dain Gar	DLG	

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 480 CASING SIZE & WEIGHT 2 1/2
 CASING DEPTH 443 DRILL PIPE _____ TUBING _____ OTHER baffle 412
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 2.4 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 1/2 bpm
 REMARKS: Held crew meet. Established rate. Mixed & pumped 1/2 gal polymer followed by 100 # gal. Circulated to condition hole. Mixed & pumped 63 SK. 50150 cement plus 5# Kalscal 5% salt 270 gal. per sack. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PSI. Set floor. closed water.

FDS, Wes

Adam Mader

[illegible]

Bayln 3737

AUTHORIZTION

NO COMPANY REP
Jim OK'd

TITLE

250036

DATE _____

SALES TAX

ESTIMATED

23.59

2813.37

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.