



KANSAS CORPORATION COMMISSION 1092410
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 # 34682
Name: E. F. Oil, LLC
Address 1: 4135 STAFFORD RD
Address 2: _____
City: WELLSVILLE State: KS Zip: 66092 + _____
Contact Person: Eddie Winslow
Phone: (913) 638-4885
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: NA
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>8/22/2012</u>	<u>8/23/2012</u>	<u>9/7/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-26186-00-00

Spot Description: _____
NE SE SE SE Sec. 30 Twp. 15 S. R. 21 East West
450 Feet from North / South Line of Section
165 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Franklin
Lease Name: Winslow Well #: 4
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 996 Kelly Bushing: 0
Total Depth: 779 Plug Back Total Depth: _____
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: 21 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: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Deanna Garrison Date: 09/10/2012



1092410

Operator Name: E. F. Oil, LLC Lease Name: Winslow Well #: 4
 Sec. 30 Twp. 15 S. R. 21 East West County: Franklin

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: GammaRay/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum GammaRay
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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	9	7	10	21	Portland	3	50/50 POZ
Completion	5.6250	2.8750	8	755	Portland	112	50/50 POZ

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 <i>(Amount and Kind of Material Used)</i>	Depth
3	718-728	2" DML RTG	10

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 <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 39538

LOCATION D'Hawg

FOREMAN Alan Mader

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
8.23.12	7984	Winslow 4	SW 31	15	21	FR
CUSTOMER			TRUCK #			
Town Oilfield Services			516	Ala Mad	Safety Meet	
MAILING ADDRESS			666	Ke Car	KL	
P.O. Box 339			505/1106	Gas Ric	JK	
CITY			510	Set Tru	ST	
hougburg						
STATE		ZIP CODE				
KS		66053				

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 779 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 755 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 4-1 DISPLACEMENT PSI 800 MIX PSI 200 RATE 5 bpm

REMARKS: Held crew meet. Established rate. Mixed & pumped 100# gel followed by 112 sls 30/50 cement plus 270 gel. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set fluid. Closed valve.

TQS, Chad

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	15	MILEAGE	40.00	600.00
5402	755	casing footage		
5407	min	ten miles	350.00	350.00
5501C	1 1/2	transport	112.00	168.00
1124	112	30/50 cement		1226.40
1118B	288	gel		624.8
11402	1	2 1/2 plug		28.00
SCANNED				
SALES TAX ESTIMATED TOTAL				102.56
				3025.44

Revin 3737 No company rep
 AUTHORIZATION Jim OK'd 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.

Franklin County, KS
 Well: Winslow # 4
 Lease Owner: E F Oil

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

Commenced Spudding:
 8/22/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
30	Soil-Clay	20
39	Shale	59
5	Lime	64
4	Shale	68
18	Lime	86
7	Shale	93
10	Lime	103
5	Shale	108
18	Lime	126
35	Shale	161
26	Lime	187
78	Shale	262
28	Lime	290
6	Shale	296
6	Lime	302
23	Shale	325
4	Lime	329
18	Shale	347
1	Lime	348
16	Shale	364
24	Lime	388
10	Shale	398
21	Lime	419
4	Shale	423
5	Lime	428
3	Shale	431
5	Lime	436
8	Shale	444
5	Sand	449
110	Shale	559
13	Sand	572
6	Sandy Shale	578
86	Shale	664
	Lime	670
2	Slate	672
7	Lime	679
4	Shale	683
5	Lime	688
27	Shale	715
3	Broken Sand	718

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals $D^2 \times 14xh$
 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. 4

Farm Winstoe

KS Georgetown
 (State) (County)

20 15 21
 (Section) (Township) (Range)

For E + F O.I.
 (Well Owner)

Town Oilfield Services, Inc.

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

Thickness of Strata	Formation	Total Depth	Remarks
20	shale	20	
39	shale	59	
5	lime	64	
4	shale	68	
15	lime	83	
7	shale	90	
10	lime	100	
8	shale	108	
18	lime	126	
35	shale	161	
36	lime	197	
75	shale	272	
28	lime	300	
6	shale	306	
6	lime	312	
23	shale	335	
4	lime	339	
18	shale	357	
1	lime	358	
16	shale	374	
24	lime	398	
30	shale	428	
21	lime	449	
4	shale	453	
5	lime	458	
3	shale	461	
5	lime	466	Harder

