



KANSAS CORPORATION COMMISSION 1088052  
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 # 5723  
Name: John M. Denman Oil Co., Inc.  
Address 1: PO BOX 36  
Address 2: \_\_\_\_\_  
City: SEDAN State: KS Zip: 67361 + \_\_\_\_\_  
Contact Person: SHELLEY WISE  
Phone: (620) 725-3727  
CONTRACTOR: License # 5831  
Name: M.O.K.A.T.  
Wellsite Geologist: NONE  
Purchaser: COFFEYVILLE RESOURCES

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SLOW
- 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>06/21/2012</u>	<u>06/24/2012</u>	<u>07/16/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-019-27206-00-00

Spot Description: \_\_\_\_\_

SW SE NE NE Sec. 1 Twp. 35 S. R. 11  East  West

3970 Feet from  North /  South Line of Section

4785 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Chautauqua

Lease Name: BECK Well #: S-1

Field Name: PERU / SEDAN

Producing Formation: WAYSIDE

Elevation: Ground: 972 Kelly Bushing: 0

Total Depth: 1237 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 43 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: 1237

feet depth to: 0 w/ 130 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 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: 09/10/2012



1088052

Operator Name: John M. Denman Oil Co., Inc. Lease Name: BECK Well #: S-1  
 Sec. 1 Twp. 35 S. R. 11  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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name GAMMA RAY	Top 1142 Datum
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 (If no, Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run: GAMMA RAY CASING COLLAR VARIABLE DENSITY LOG COMPENSATED DENSITY SIDEWALL LOG DUAL INDUCTION LL3/GR LOG			

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	9.6250	8.6250	18	43	PORTLAND	8	
CASING	6.6250	4.5	11	1232	PORTLAND	130	
PRODUCTION	4.5	2.375	4.7	1162.7		0	

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
1	1142-1149		
2	1150-1169		
1	1170-1176		

TUBING RECORD:	Size: <u>2.2.375</u>	Set At: <u>1162.7</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>07/16/2012</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls. <u>0</u>	Gas Mcf	Water Bbls. <u>20</u>	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>1142-1176</u>
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6/27/2012



3390

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	DENMAN OIL	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	LS	Section		Excess (%)	30
Customer Acct #		TWP		Density	13.8
Well No.	BECK S1	RGE		Water Required	
Mailing Address		Formation		Yield	1.75
City & State		Hole Size	6.75	Slurry Weight	
Zip Code		Hole Depth	1237	Slurry Volume	
Contact		Casing Size	4.5	Displacement	19.8
Email		Casing Depth	1232	Displacement PSI	600
Cell		Drill Pipe		MIX PSI	200
Dispatch Location	BARTLESVILLE	Tubing		Rate	5

Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	40	PER MILE	\$4.00	\$ 160.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
5402	FOOTAGE	1,232	PER FOOT	0.22	\$ 271.04
<b>EQUIPMENT TOTAL</b>					<b>\$ 1,811.04</b>

Cement, Chemicals and Water					
1126A	THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CLORIDE)	130.00	0	\$19.20	\$ 2,496.00
1110A	KOL SEAL (50 # SK)	650.00	0	\$0.46	\$ 299.00
1118B	PREMIUM GEL/BENTONITE (50#)	150.00	0	\$0.21	\$ 31.50
1107A	PHENOSEAL	40.00	0	\$1.29	\$ 51.60
1123	CITY WATER (PER 1000 GAL)	5.40	0	\$16.54	\$ 89.32
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>CHEMICAL TOTAL</b>					<b>\$ 2,967.42</b>

Water Transport					
5501C	WATER TRANSPORT (CEMENT)	3	TER TRANSPORT (CEME)	\$112.00	\$ 336.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>TRANSPORT TOTAL</b>					<b>\$ 336.00</b>

Cement Floating Equipment (TAXABLE)					
0	Cement Basket		0	\$0.00	\$ -
0	Centralizer		0	\$0.00	\$ -
0	Float Shoe		0	\$0.00	\$ -
0	Float Collars		0	\$0.00	\$ -
0	Guide Shoes		0	\$0.00	\$ -
0	Baffle and Flapper Plates		0	\$0.00	\$ -
0	Packer Shoes		0	\$0.00	\$ -
0	DV Tools		0	\$0.00	\$ -
0	Ball Valves, Swedges, Clamps, Misc.		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
4404	4' 1/2" RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
0	Downhole Tools		0	\$0.00	\$ -
<b>CEMENT FLOATING EQUIPMENT TOTAL</b>					<b>\$ 45.00</b>

TRUCK#	DRIVER NAME
674	Donnie
419	JAMES W
538	FRANK
NUNNLEY TP	SAM

SUB TOTAL	\$ 5,159.46
SALES TAX (8.30%)	\$ 250.03
TOTAL	\$ 5,409.49
DISCOUNT (10%)	\$ 540.95
<b>DISCOUNTED TOTAL</b>	<b>\$ 4,868.54</b>

AUTHORIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

TITLE \_\_\_\_\_  
FOREMAN *[Signature]*

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.

