



KANSAS CORPORATION COMMISSION 1094543  
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 # 33306  
Name: Blake Exploration, LLC  
Address 1: 201 S MAIN  
Address 2: PO BOX 150  
City: BOGUE State: KS Zip: 67625 +  
Contact Person: Mike Davignon  
Phone: ( 785 ) 421-2921  
CONTRACTOR: License # 33350  
Name: Southwind Drilling, Inc.  
Wellsite Geologist: Mike Davignon  
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>2/12/2012</u>	<u>02/20/2012</u>	<u>02/20/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-109-21057-00-00

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

SE NW SW SE Sec. 7 Twp. 14 S. R. 32  East  West  
950 Feet from  North /  South Line of Section  
2250 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Logan

Lease Name: RINER 'B' Well #: 1

Field Name: \_\_\_\_\_

Producing Formation: dry

Elevation: Ground: 2831 Kelly Bushing: 2839

Total Depth: 4515 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 224 Feet

Multiple Stage Cementing Collar Used?  Yes  No

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

If Alternate II completion, cement circulated from: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 1000 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: NAOMI JAMES Date: 09/26/2012



1094543

Operator Name: Blake Exploration, LLC Lease Name: RINER 'B' Well #: 1

Sec. 7 Twp. 14 S. R. 32  East  West County: Logan

**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 checked="" type="checkbox"/> Yes <input 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:  R/A GUARD	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>ANHYDRITE</td> <td>2298</td> <td>+541</td> </tr> <tr> <td>HEEBNER</td> <td>3783</td> <td>-944</td> </tr> <tr> <td>LANSING</td> <td>3830</td> <td>-991</td> </tr> <tr> <td>STARK</td> <td>4072</td> <td>-1233</td> </tr> <tr> <td>JOHNSON</td> <td>4410</td> <td>-1573</td> </tr> <tr> <td>MISSISSIPPIAN</td> <td>4506</td> <td>-1667</td> </tr> </tbody> </table>	Name	Top	Datum	ANHYDRITE	2298	+541	HEEBNER	3783	-944	LANSING	3830	-991	STARK	4072	-1233	JOHNSON	4410	-1573	MISSISSIPPIAN	4506	-1667
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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	10.25	8.875	24	224	COM	175	3%CC 2%GEL

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

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  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 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: _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

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

TICI NUMBER 33879  
LOCATION Oakley, Ks  
FOREMAN Walt Dunkel

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-9-12	1487	Riner B #1	7	14	32	Logan
CUSTOMER <u>Blake Exploration, LLC</u>			TRUCK #			
MAILING ADDRESS			DRIVER		TRUCK #	
CITY			DRIVER		TRUCK #	
STATE			DRIVER		TRUCK #	
ZIP CODE			DRIVER		TRUCK #	

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 224' CASING SIZE & WEIGHT 8 5/8-23#  
 CASING DEPTH 224' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 20'  
 DISPLACEMENT 13 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 6 BPM

REMARKS: Safety Meeting, Rig up on Southwind #3  
Circ Casing on Bottom, mixed 175 lbs Com, 3% CC-2% Gel  
Displace 13 BBL H<sub>2</sub>O @ 200#, Shut in  
Cement Did Circ

Thank You  
Walt Dunkel

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1,085.00	1,085.00
5406	10	MILEAGE	5.00	50.00
11045	175	Class A Cement	17.65	3,088.75
1102	495#	Calcium Chloride	.89	440.55
1118B	330#	Bentonite Gel	.25	82.50
5407	8.23	Ten Miles-a-Dalving	167	410.00
				5,156.80
		Less 10% Disc		- 515.68
				4,641.12
		247808	SALES TAX	253.52
			ESTIMATED TOTAL	4,894.64

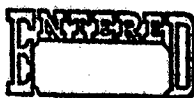
Rev'n 3737

AUTHORIZATION Tim Fehin 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.



**CONSOLIDATED**  
Oil Well Services, LLC



TICKET NUMBER 33884  
LOCATION Oakley, KS  
FOREMAN Walt Dinkel

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
2-21-12	11487	Riner B #1	7	14 <sup>s</sup>	32 <sup>w</sup>	Logan
CUSTOMER Blake Explorations, LLC			Oakley Sto Mustang 4N 2S			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			463	Josh Giddle		
STATE			439	Cory Davis		
ZIP CODE						

JOB TYPE PTA HOLE SIZE 7 7/8 HOLE DEPTH 4515' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT In CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Safety Meeting, Plug as ordered

25 sks @ 2310'  
100 sks @ 1200'  
40 sks @ 275'  
10 sks @ 40'  
30 sks in R.H.  
15 sks in M.H.

Thank You  
Walt + crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	1325 <sup>00</sup>	1,325 <sup>00</sup>
5406	10	MILEAGE	5 <sup>00</sup>	50 <sup>00</sup>
1131	220 sks	60/40 por	15 <sup>10</sup>	3322 <sup>08</sup>
1118B	756#	Gel	.25	189 <sup>00</sup>
1107	55#	Pls Seal	2.82	155 <sup>10</sup>
5407	9.46	Ton Mileage Delivery	167	410 <sup>00</sup>
				5,451 <sup>10</sup>
				545 <sup>11</sup>
				4,905 <sup>99</sup>
				247982
			SALES TAX	257 <sup>35</sup>
			ESTIMATED TOTAL	5163 <sup>35</sup>

Ravin 3737

AUTHORIZATION Tim Fahn

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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