



KANSAS CORPORATION COMMISSION 1095293
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 # 31302
Name: Jones & Buck Development, LLC
Address 1: PO BOX 68
Address 2:
City: SEDAN State: KS Zip: 67361 + 0068
Contact Person: P.J. Buck
Phone: (620) 725-3636
CONTRACTOR: License # 33350
Name: Southwind Drilling, Inc.
Wellsite Geologist: Harvey Gough
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 #:

03/09/2012	03/16/2012	03/16/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-083-21758-00-00
Spot Description:
NE_NW_NW Sec. 3 Twp. 24 S. R. 21 East West
330 Feet from North / South Line of Section
990 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Hodgeman
Lease Name: Gleason Well #: JBD #1
Field Name:
Producing Formation: Marmaton
Elevation: Ground: 2340 Kelly Bushing: 2350
Total Depth: 4460 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 634 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: 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: NAOMI JAMES Date: 10/02/2012



1095293

Operator Name: Jones & Buck Development, LLC Lease Name: Gleason Well #: JBD #1
 Sec. 3 Twp. 24 S. R. 21 East West County: Hodgeman

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Lansing</td> <td>4000</td> <td></td> </tr> <tr> <td>Lime/Shale</td> <td>4143</td> <td></td> </tr> <tr> <td>Marmaton</td> <td>4420</td> <td></td> </tr> </table>	Name	Top	Datum	Lansing	4000		Lime/Shale	4143		Marmaton	4420	
Name	Top	Datum											
Lansing	4000												
Lime/Shale	4143												
Marmaton	4420												

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	12.25	8.625	20	634	65/35 Poz. Class A	375	flo-seal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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

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: <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 checked="" type="checkbox"/> Other (Specify) <u>Plugged</u>	PRODUCTION INTERVAL: _____ _____
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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 # 248370

Invoice Date: 03/13/2012 Terms: 10/10/30, n/30

Page 1

J. B. D. % P. J. BUCK
P.O. BOX 68
SEDAN KS 67361
(620) 725-3636

GLEASON JBD#1
34414
3-24-21
3-9-2012
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	150.00	17.6500	2647.50
1127A	65/35 POZ MIX	225.00	15.2000	3420.00
1118B	PREMIUM GEL / BENTONITE	1457.00	.2500	364.25
1102	CALCIUM CHLORIDE (50#)	423.00	.8900	376.47
1107	FLO-SEAL (25#)	56.00	2.8200	157.92
4132	CENTRALIZER 8 5/8"	2.00	82.0000	164.00
4411	8 5/8" RUBBER PLUG (TOP)	1.00	135.0000	135.00

Sublet Performed	Description	Total
9999-130	CASH DISCOUNT	-726.52
9999-130	CASH DISCOUNT	-323.36

Description	Hours	Unit Price	Total
399 CEMENT PUMP (SURFACE)	1.00	1085.00	1085.00
399 EQUIPMENT MILEAGE (ONE WAY)	65.00	5.00	325.00
528 TON MILEAGE DELIVERY	1092.00	1.67	1823.64

Amount Due 11040.05 if paid after 04/12/2012

Parts:	7265.14	Freight:	.00	Tax:	487.14	AR	9936.04
Labor:	.00	Misc:	.00	Total:	9936.04		
Sublt:	-1049.88	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0608

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



CONSOLIDATED
Oil Well Services, LLC



TICKET NUMBER 34414
LOCATION Oakley, KS
FOREMAN Kelly Gabel

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE <u>3-9-12</u>	CUSTOMER # <u>4291</u>	WELL NAME & NUMBER <u>Gleason JBD #1</u>	SECTION <u>3</u>	TOWNSHIP <u>24</u>	RANGE <u>21</u>	COUNTY <u>KS Hodgeman</u>	
CUSTOMER <u>Soncs & Buck Development</u>		MAILING ADDRESS <u>Harston Storah Storah 15th AOG 1/2 E Sinto</u>		TRUCK # <u>399</u>	DRIVER <u>Miles</u>	TRUCK # <u>528-T127</u>	DRIVER <u>Corey Reats</u>
CITY	STATE	ZIP CODE					

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 634 CASING SIZE & WEIGHT 8 5/8 24 #
 CASING DEPTH 633 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 135-14 # SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 39 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting, Rigged up on southwind drilling rig # 20
hooked up to circulate, mixed 225 SKS 65/35 690 gel 3% ACC 1/4" Flo-seal,
tailed in with 150 SKS com 3% ACC & 2% gel, shut down, released plug,
displaced with 39 bbl water, shut in, washed out pumps & lines,
Rigged down & left location.

Cement did circulate

APPROX 110 bbl to Pit
centralizers on it #3 1+4

Thank You
Kelly & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1085.00	1085.00
5406	65	MILEAGE	5.00	325.00
11045	150 SKS	Class A cement	17.55	2647.50
1127A	225 SKS	65/35 P2Z	15.20	3420.00
1118B	1457 #	Bentonite	.25	364.25
1102	423 #	Calcium chloride	.89	376.47
1107	56 #	Flo-seal	2.82	157.92
5407A	16.8	Ten mileage delivery	16.7	1833.64
4132	2	8 3/8 centralizer	82.00	164.00
4411	1	8 5/8 rubber Plug	135.00	135.00
				10488.75
				9448.90
				487.14
				9936.04

Revin 3787
1:00 PM 3-10-12
AUTHORIZATION Tim Fehin

TITLE _____ DATE 3-10-12

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.

ALLIED CEMENTING CO., LLC. 042502

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Great Bend

DATE <u>3-16-12</u>	SEC <u>3</u>	TWP <u>24</u>	RANGE <u>21</u>	CALLED OUT	ON LOCATION	JOB START <u>7:30 AM</u>	JOB FINISH <u>8:30 PM</u>
LEASE <u>Gleason</u>		WELL# <u>JBO 1</u>		LOCATION <u>off track west to south</u>		COUNTY <u>Hodgson</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)				Cement plug 8" Wash 1 1/2 Feet			
CONTRACTOR <u>Southwestern</u>				OWNER			
TYPE OF JOB <u>Retail plug</u>							
HOLE SIZE <u>7 1/2</u>				I.D. <u>4 1/2</u>			
CEMENT				AMOUNT ORDERED <u>120 SX 60/40 1 1/2 2061</u>			
CASING SIZE				DEPTH			
TUBING SIZE				DEPTH <u>1470</u>			
DRILL PIPE <u>4 1/2</u>				DEPTH			
TOOL				DEPTH			
PRES. MAX				MINIMUM			
MEAS. LINE				SHOE JOINT			
CEMENT LEFT IN CSG.				POZMIX			
PERFS.				GEL			
DISPLACEMENT				CHLORIDE			
				ASC			

EQUIPMENT			
PUMP TRUCK	CEMENTER <u>ANAYTS DAVID</u>		
# <u>366</u>	HELPER <u>Kevin</u>		
BULK TRUCK			
# <u>744/170</u>	DRIVER <u>Sam</u>		
BULK TRUCK			
#	DRIVER		
		HANDLING	@
		MILEAGE	@

REMARKS:	TOTAL
<u>1st Plug 1470 mix 50 SX</u>	
<u>2nd Plug 660 mix 50 SX</u>	
<u>3rd Plug 60 mix 20 SX</u>	
<u>4th Rat mix 30 SX</u>	
<u>5th Manure mix 20 SX</u>	
	TOTAL
CHARGE TO:	TOTAL
<u>Texas & Buck Development</u>	
STREET <u>P.O. Box 68</u>	
CITY <u>Decatur</u> STATE <u>KS</u> ZIP <u>67361</u>	

PLUG & FLOAT EQUIPMENT	
	TOTAL
SALES TAX (If Any)	
TOTAL CHARGES	
DISCOUNT	IF PAID IN 30 DAYS

PRINTED NAME Tim Edwards

SIGNATURE [Signature]

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.