



KANSAS CORPORATION COMMISSION 1093017  
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 # 33977  
Name: E K Energy LLC  
Address 1: 12220 SW COLONY RD  
Address 2: PO BOX 267  
City: COLONY State: KS Zip: 66015 + 4017

Contact Person: David Kimzey  
Phone: (620) 496-6257

CONTRACTOR: License # 33977  
Name: E K Energy LLC  
Wellsite Geologist: Hammond  
Purchaser: coffeyville

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 #: \_\_\_\_\_

4/23/2012	4/24/2012	4/24/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30300-00-00  
Spot Description:  
SE SW NE NE Sec. 12 Twp. 24 S. R. 18  East  West  
4125 Feet from  North /  South Line of Section  
825 Feet from  East /  West Line of Section

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

Lease Name: Meiwes Well #: 19

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

Producing Formation: Tucker

Elevation: Ground: 969 Kelly Bushing: 0000

Total Depth: 941 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 20 Feet

Multiple Stage Cementing Collar Used?  Yes  No

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

If Alternate II completion, cement circulated from: 928

feet depth to: 0 w/ 105 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 Gantner Date: 09/10/2012



1093017

Operator Name: E K Energy LLC

Lease Name: Meiwes

Well #: 19

Sec. 12 Twp. 24 S. R. 18  East  West

County: Allen

**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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	soil & clay	0	3
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	lime	3	241
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	shale	241	436
List All E. Logs Run:		lime	436	596
		shale	596	928
		oil sand	928	941

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	12.25	8.6250	21	20	portland	5	
production	6.7500	4.5000	10.5	928.5	portland	105	

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. 9/1/2012  
Producing Method:  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	1		0		30			18

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input checked="" 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: 928.5 941
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**PAYLESS CONCRETE PRODUCTS, INC.**

P.O. BOX 664  
 802 N. INDUSTRIAL RD.  
 IOLA, KS 66749

**INVOICE**

Invoice Number: 31429  
 Invoice Date: Apr 25, 2012  
 Page: 1  
 Duplicate

Voice: 620-365-5588  
 Fax:

**Bill To:**  
 E.K. ENERGY LLC  
 1495 3000 ST.  
 MORAN, KS 66755-3949

**Ship to:**  
 E.K. ENERGY LLC  
 1495 3000 ST.  
 MORAN, KS 66755-3949

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
EK001	WELL#19	Net 10th of Next Month	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	TRUCK		5/10/12

Quantity	Item	Description	Unit Price	Amount
105.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX	5.10	535.50
105.00	MH	MIXING & HAULING	2.50	262.50
1.00	TRUCKING	TRUCKING CHARGE	50.00	50.00

*invoiced  
19#*

Subtotal	848.00
Sales Tax	64.02
Total Invoice Amount	912.02
Payment/Credit Applied	
<b>TOTAL</b>	<b>912.02</b>

Check/Credit Memo No: