



KANSAS CORPORATION COMMISSION 1089126
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 # 33514
Name: Jo-Allyn Oil Co., Inc.
Address 1: PO BOX 446
Address 2: _____
City: LAVERNE State: OK Zip: 73848 + 0446
Contact Person: Allen Barby
Phone: (580) 921-3366
CONTRACTOR: License # 33549
Name: Landmark Drilling, LLC
Wellsite Geologist: RYAN SEIB
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 #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
12/09/2011	12/22/2011	01/30/2012

API No. 15 - 15-025-21535-00-00

Spot Description: _____
SW SE SE Sec. 10 Twp. 34 S. R. 22 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: Clark
Lease Name: HOWELL Well #: 1-10
Field Name: SNAKE CREEK WEST

Producing Formation: MISS

Elevation: Ground: 1851 Kelly Bushing: 1859

Total Depth: 5600 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 758 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: 5000 ppm Fluid volume: 5565 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 Garbar Date: 09/17/2012



1089126

Operator Name: Jo-Allyn Oil Co., Inc. Lease Name: HOWELL Well #: 1-10
 Sec. 10 Twp. 34 S. R. 22 East West County: Clark

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 checked="" type="checkbox"/> Yes <input 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: Attached	<input checked="" 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>MORR SH</td> <td>5384</td> <td>-3525</td> </tr> <tr> <td>MORR SD</td> <td>5442</td> <td>-3583</td> </tr> <tr> <td>MISS CHERT</td> <td>5473</td> <td>-3614</td> </tr> <tr> <td>ST GEN</td> <td>5556</td> <td>-3697</td> </tr> <tr> <td>TD</td> <td>5545</td> <td>-3786</td> </tr> </table>	Name	Top	Datum	MORR SH	5384	-3525	MORR SD	5442	-3583	MISS CHERT	5473	-3614	ST GEN	5556	-3697	TD	5545	-3786
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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
Attached	Attached	Attached	Attached	Attached	Attached	Attached	Attached

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: <input type="checkbox"/> Yes <input type="checkbox"/> 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Jo-Allyn Oil Co., Inc.
Well Name	HOWELL 1-10
Doc ID	1089126

All Electric Logs Run

MICRORESISTIVITY LOG
ARRAY INDUCTION SHALLOW FOCUSED ELECTRIC LOG
CEMENT BOND LOG
GUN GAMMA RAY LOG
CORRELATION GAMMA RAY LOG

Form	ACO1 - Well Completion
Operator	Jo-Allyn Oil Co., Inc.
Well Name	HOWELL 1-10
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Casing

SURFACE	12.25	8.625	0	758	CLASS A	250	3% CC 2%GEL
CASING	7.875	5.5	17	5599	AA2	75	60/40
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0

ALLIED CEMENTING CO., LLC. 037981

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

SERVICE POINT:

OKL. Landmark

DATE <u>12-10-11</u>	SEC <u>10</u>	TWP <u>34E</u>	RANGE <u>22E</u>	CALLED OUT	ON LOCATION	JOB START <u>2:00pm</u>	JOB FINISH <u>2:00pm</u>
LEASE <u>Handl</u>		WELL # <u>1-10</u>		LOCATION <u>Silkspg Sta Rd 4, Watto Pl 25</u>		COUNTY	STATE <u>KS</u>
OLD OR NEW (Circle one)				<u>South to Rd 2, 1/2 mi. South of Bus Sta</u>			

CONTRACTOR Landmark Drilling OWNER Jo Allyn Oil

TYPE OF JOB <u>Surface</u>	CEMENT AMOUNT ORDERED
HOLE SIZE <u>12 1/4</u> T.D. <u>759'</u>	<u>250 SK 65:35:67:90/43/100 + 1/2" Rosand</u>
CASINO SIZE <u>8 1/2</u> DEPTH <u>759'</u>	<u>100 SK A+3/4" + 2/100'</u>
TUBING SIZE DEPTH	
DRILL PIPE DEPTH	
TOOL DEPTH	
PRES. MAX <u>400 psi</u> MINIMUM	
MEAS. LINE SHOE JOINT <u>42'</u>	
CEMENT LEFT IN CSG. <u>42'</u>	
PERFS.	
DISPLACEMENT <u>45 1/2 lbs/sk</u>	

EQUIPMENT			
PUMP TRUCK	CEMENTER <u>with truck</u>		
# <u>971/202</u>	HELPER <u>Ron Kelley</u>		
BULK TRUCK			
# <u>323/202</u>	DRIVER <u>Elmer Over</u>		
BULK TRUCK			
#	DRIVER		

COMMON <u>100 SK</u>	①	<u>16.25</u>	<u>1625.00</u>
POZMIX	②		
GEL <u>5 SK</u>	③	<u>21.25</u>	<u>106.25</u>
CHLORIDE <u>17 SK</u>	④	<u>58.20</u>	<u>987.40</u>
ASC	⑤		
<u>DLW 250 SK</u>	⑥	<u>15.50</u>	<u>3875.00</u>
<u>Floceal 62</u>	⑦	<u>2.70</u>	<u>167.40</u>
	⑧		
	⑨		
	⑩		
HANDLING <u>388</u>	⑪	<u>2.25</u>	<u>879.00</u>
MILEAGE <u>388/65/11</u>	⑫		<u>2774.26</u>
			TOTAL 10,410.25

REMARKS:			
<u>Bit circulation with log</u>			
<u>pump 5116/1000</u>			
<u>mix 250 SK 100 cement</u>			
<u>mix 100 SK 100 cement 1/2 from Adams</u>			
<u>dr 45 1/2 lbs/sk 100 slotted</u>			
<u>cement bit color 409/1000</u>			

CHARGE TO: Jo Allyn Oil

STREET _____

CITY _____ STATE _____ ZIP _____

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.

PRINTED NAME _____

SIGNATURE 

SERVICE			
DEPTH OF JOB <u>759'</u>			
PUMP TRUCK CHARGE	<u>1125.00</u>		
EXTRA FOOTAGE <u>458'</u>	⑬	<u>.95</u>	<u>435.10</u>
MILEAGE <u>130</u>	⑭	<u>7.00</u>	<u>910.00</u>
MANIFOLD <u>Lead Barloc</u>	⑮		<u>200.00</u>
<u>light vehicle 130</u>	⑯	<u>4.00</u>	<u>520.00</u>
	⑰		
			TOTAL 3170.00

8 1/2" PLUG & FLOAT EQUIPMENT			
<u>1- Rubber plug</u>	⑱		<u>112.00</u>
<u>1- Barloc</u>	⑲		<u>478.00</u>
<u>4- centralizer</u>	⑳		<u>64.00</u>
<u>1- Bubble plate</u>	㉑		<u>112.00</u>
	㉒		
			TOTAL 766.00

SALES TAX (IF Any) _____

TOTAL CHARGES 14,366.25

DISCOUNT 20% IF PAID IN 30 DAYS

Net 11,493.00

ALLIED CEMENTING CO., LLC. 037981

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

SERVICE POINT:
Wichita

DATE <i>12-10-11</i>	SEC. <i>10</i>	TWP. <i>34s</i>	RANGE <i>22</i>	CALLED OUT	ON LOCATION	JOB START <i>2:00 pm</i>	JOB FINISH <i>3:00 pm</i>
LEASE <i>Home</i>	WELL # <i>1-10</i>	LOCATION <i>S. 1/2 Sec 10 Twp 34S R. 22E</i>		COUNTY <i>JL</i>	STATE <i>KS</i>		
OLD OR NEW (Circle one)				<i>South 1/2 R. 22E 1/4 Sec 10 Twp 34S</i>			
CONTRACTOR <i>Landmark Drilling</i>				OWNER <i>Jo Allen Oil</i>			
TYPE OF JOB <i>5" hole</i>				CEMENT			
HOLE SIZE <i>5 1/4"</i>				AMOUNT ORDERED			
CASINO SIZE <i>2 1/2"</i>				<i>250 sq 65-35 6/8 4 3/4 in. 1/2 in. 1/2 in.</i>			
TUBING SIZE <i>2 1/2"</i>				<i>100 sq A 13/16 1/2 1/2</i>			
DRILL PIPE <i>2 1/2"</i>				COMMON			
TOOL <i>2 1/2"</i>				POZ MIX			
PRES. MAX <i>4000</i>				GEL			
MEAS. LINE				CHLORIDE			
CEMENT LEFT IN CSG <i>42</i>				ASC			
PERFS				HANDLING			
DISPLACEMENT <i>45 1/2 lbs H₂O</i>				MILEAGE			
EQUIPMENT				TOTAL			
PUMP TRUCK <i>GEMENTER</i>				SERVICE			
# <i>471302</i> HELPER <i>Ron G. Vey</i>				DEPTH OF JOB <i>75'</i>			
BULK TRUCK				PUMP TRUCK CHARGE			
# <i>933689</i> DRIVER <i>Edde Piper</i>				EXTRA FOOTAGE			
BULK TRUCK				MILEAGE			
DRIVER				MANIFOLD			
				TOTAL			

REMARKS:
*Per manual on cement
mix 250 sq 65-35 6/8 4 3/4 in. 1/2 in. 1/2 in.
100 sq 65-35 6/8 4 3/4 in. 1/2 in. 1/2 in.
cement 42 lbs H₂O
cement 42 lbs H₂O*

CHARGE TO: *Jo Allen Oil*

STREET _____ CITY _____ STATE _____ ZIP _____

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PRINTED NAME _____
SIGNATURE _____

TOTAL _____
SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____
IF PAID IN 30 DAYS _____

PLUG & FLOAT EQUIPMENT
8 3/4"
1- Rubber plug
1- Basket
1- Cement mixer
1- Buff plate

TOTAL _____
SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____
IF PAID IN 30 DAYS _____