



KANSAS CORPORATION COMMISSION 1094435  
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 # 33982  
Name: Alton Oil LLC  
Address 1: PO BOX 117  
Address 2: \_\_\_\_\_  
City: WINFIELD State: KS Zip: 67156 + 0117  
Contact Person: Michael A. Pressnall  
Phone: ( 620 ) 221-4268  
CONTRACTOR: License # 32854  
Name: Gulick Drilling Co., Inc.  
Wellsite Geologist: Thomas E. Blair  
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>05/21/2012</u>	<u>05/26/2012</u>	<u>06/07/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-035-24470-00-00  
Spot Description: \_\_\_\_\_  
N2\_NE\_SE\_NE Sec. 16 Twp. 33 S. R. 4  East  West  
1500 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Cowley  
Lease Name: Steffen Unit Well #: 1  
Field Name: \_\_\_\_\_  
Producing Formation: D/A  
Elevation: Ground: 1200 Kelly Bushing: 1206  
Total Depth: 3460 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 205 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: 4000 ppm Fluid volume: 100 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 Gerrits Date: 10/01/2012



1094435

Operator Name: Alton Oil LLC Lease Name: Steffen Unit Well #: 1  
 Sec. 16 Twp. 33 S. R. 4  East  West County: Cowley

**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 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: <b>Attached</b>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>Kansas City</td> <td>2656</td> <td>-1452</td> </tr> <tr> <td>Base Kansas City</td> <td>2780</td> <td>-1578</td> </tr> <tr> <td>Cherokee</td> <td>2973</td> <td>-1767</td> </tr> <tr> <td>Mississippi</td> <td>3196</td> <td>-1990</td> </tr> <tr> <td>Mississippi Lime</td> <td>3210</td> <td>-2004</td> </tr> </table>	Name	Top	Datum	Kansas City	2656	-1452	Base Kansas City	2780	-1578	Cherokee	2973	-1767	Mississippi	3196	-1990	Mississippi Lime	3210	-2004
Name	Top	Datum																	
Kansas City	2656	-1452																	
Base Kansas City	2780	-1578																	
Cherokee	2973	-1767																	
Mississippi	3196	-1990																	
Mississippi Lime	3210	-2004																	

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	12.25	8.625	24	205	Class A	125	3% Calcium 2% Gel
Production	7.875	4.500	10.5	3260	Thick Set	140	Kol-Seal

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
4	3198-3200, 3204-3208	Acidize 1000 gallons 15% MCA	3198-3208
		Frac 5000 lbs. 20/40 sand	3198-3208

<b>TUBING RECORD:</b> 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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input checked="" 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) _____	<b>PRODUCTION INTERVAL:</b> D/A _____
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Form	ACO1 - Well Completion
Operator	Alton Oil LLC
Well Name	Steffen Unit 1
Doc ID	1094435

All Electric Logs Run

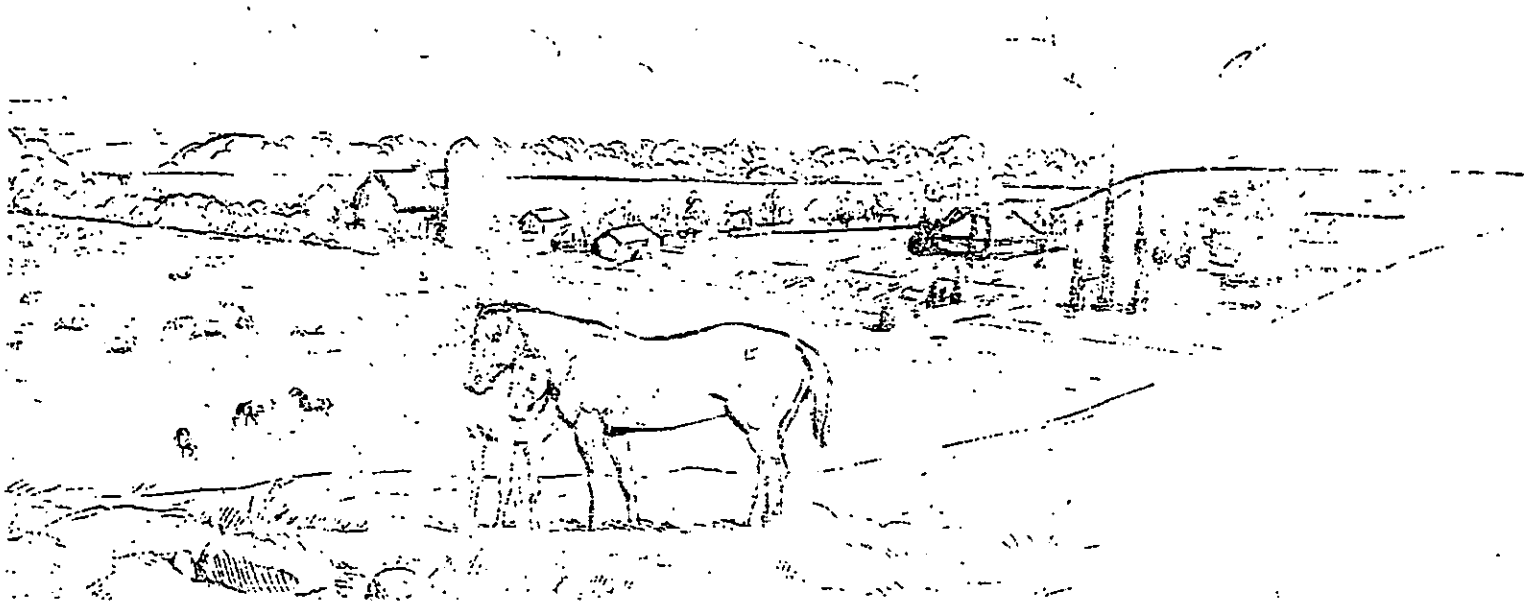
Dual Induction
Compensated Density
Micro
Radioactivity-Sonic Bond

Thomas E. Blair  
22150 SE Cole Creek Rd.  
Atlanta, KS 67008  
620.394.2324  
316.655.8585  
[tomkat@sktc.net](mailto:tomkat@sktc.net)

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### GEOLOGISTS REPORT

WELL:	Steffen Unit #1
OPERATOR:	Alton Oil, LLC
LOCATION:	N2 NE SE NE 16-33-4E Cowley Co.
CONTRACTOR:	Gulick Drilling Co., Inc.
DRILLING COMMENCED:	05-21-2012
DRILLING COMPLETED:	05-26-2012
ELEVATIONS:	1198 GL; 1206 KB
ALL MEASUREMENTS FROM:	1206 KB
DRILLING FLUIDS:	Dave Moore Drilling Fluids
OPEN HOLE LOGS:	Osage Wireline
WELLSITE GEOLOGIST:	Tom Blair



## GEOLOGICAL FORMATION TOPS

<i>FORMATION</i>	<i>SAMPLE DEPTH</i>	<i>LOG DEPTH</i>
Kansas City	2656 (-1450)	2658 (-1452)
Base Kansas City	2780 (-1574)	2784 (-1578)
Marmaton	2857 (-1652)	2864 (-1658)
Cherokee	2973 (-1767)	2976 (-1770)
Mississippi	3196 (-1990)	3194 (-1988)
Mississippi Porosity	3201 (-1995)	3204 (-1998)
Total Depth	3460 (-2254)	3463 (-2257)

## ZONES OF INTEREST AND HYDROCARBON SHOWS

FORMATION: Mississippi Chert

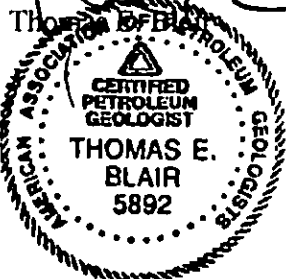
INTERVAL: 3201-3209 (sample depth)

DESCRIPTION: Chert, tan and white, spiculitic and tripolitic, traces of tripolitic porosity, some dolomite edges, fair odor, traces of free oil and gas bubbles.

## REMARKS AND RECOMMENDATIONS

The main zone of interest, the Mississippi Chert, was thinner and somewhat less porous than the offset wells to the north, but did calculate on the logs to be possibly productive. 4 ½ inch casing was set to further test this zone.

Respectfully submitted,



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**CONSOLIDATED**  
Oil Well Services, LLC

ENTERED

TICKET NUMBER 34396  
LOCATION # B0 Eldred  
FOREMAN Jacob Storm

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT** api 15-035-24470-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-21-12	1128	Stetten unit #1	16	335	4E	Cowley

CUSTOMER		MAILING ADDRESS		CITY	STATE	ZIP CODE
Alton oil		P.O. Box 117		winfield	KS	6756

TRUCK #	DRIVER	TRUCK #	DRIVER
446	Jord		
502	Steve		
511	Jacob		

JOB TYPE Surface B HOLE SIZE 12 1/4 HOLE DEPTH 219 CASING SIZE & WEIGHT 8 5/8  
 CASING DEPTH 205.31 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 12.81 DISPLACEMENT PSI 300 MIX PSI 200 RATE 5.6pm

REMARKS: Salty meeting, Break circulation, mixed 125 sks class A 3/4cc 2/gal 1/4 lb poly, displaced with 12 bbl circulating cement to surface. Shut in

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	55	MILEAGE	4.00	220.00
5407A	55	x5.88 ton mileage	1.34	433.36
1102	~ 320	calcium chloride	.74	236.80
11045	125	class A	14.95	1868.75
1118B	250	gal	.21	52.50
1107	50	poly Flake	2.35	117.50
			Subtotal	5753.91
			SALES TAX	154.74
			ESTIMATED TOTAL	5908.65

Rev 3737

250030

AUTHORIZATION \_\_\_\_\_ 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

**ENTERED**

TICKET NUMBER 36130

LOCATION 180

FOREMAN Larry Johnson

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8876

**FIELD TICKET & TREATMENT REPORT**

**CEMENT API- 15-035-24470**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-26-12	1128	Steffen Well #	16	23 S	4E	Carters
CUSTOMER <u>Altow Oil</u>			TRUCK #			
MAILING ADDRESS <u>P.O. Box 117</u>			DRIVER			
CITY <u>Wrayfield</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>67556</u>			TRUCK #			
			DRIVER			

JOB TYPE Acid HOLE SIZE 7 7/8 HOLE DEPTH 5460 CASING SIZE & WEIGHT 4 1/2  
 CASING DEPTH 3456 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER Phy 3450  
 SLURRY WEIGHT 15.5 SLURRY VOL 33 WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING 108 lb. JT  
 DISPLACEMENT 24.85 DISPLACEMENT PSI 550 MIX PSI 0 RATE 8.2

REMARKS: Repacked up to 4 1/2 casing - Broke circulation flow - Pumped 500 lbs fresh water, 100 lbs mud flush, 500 lbs fresh water, 140 lbs thick-set + 5 lbs kal-sol - flushed pump & pipes - Displaced 545 lbs to land plug at 1250 lbs - Released float valve.

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	47	MILEAGE	4.00	188.00
5402	960	Footage	.22	211.20
1126A	140	sk Thick-set	19.20	2688.00
1110A	700	lbs kal-sol	.46	322.00
1141G	500	gals Mud Flush	1.05	525.00
5407A	47	Bulk Delivery x 7.35 x	1.34	462.90
5502C	5	80 Vac - Citywater	90.00	450.00
4161	1	4 1/2 ACU Float Shoe	286.00	286.00
4453	1	4 1/2 latch down	232.00	232.00
4103	1	4 1/2 Cement Basket	218.00	218.00
4129	6	4 1/2 Cement Boxes	42.00	252.00
		Subtotal		6865.10
		SALES TAX		307.51
		ESTIMATED TOTAL		7172.61

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250162

AUTHORIZATION

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.