



KANSAS CORPORATION COMMISSION 1095286  
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 # 3231  
Name: McGowan Oil Company, a General Partnership  
Address 1: 302 N SUMMIT  
Address 2: \_\_\_\_\_  
City: ARKANSAS CITY State: KS Zip: 67005 + 2296  
Contact Person: Dan McGowan  
Phone: ( 620 ) 442-2210  
CONTRACTOR: License # 32701  
Name: C & G Drilling, Inc.  
Wellsite Geologist: George Friedel  
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 #: \_\_\_\_\_

05/17/2012    05/25/2012    05/25/2012  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date    Recompletion Date

API No. 15 - 15-035-24475-00-00

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

E2 W2 W2 NE Sec. 2 Twp. 35 S. R. 7  East  West

1320 Feet from  North /  South Line of Section

2145 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE     NW     SE     SW

County: Cowley

Lease Name: Fulsom Well #: 1-2

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

Producing Formation: NA

Elevation: Ground: 1240 Kelly Bushing: 1247

Total Depth: 3262 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 332 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: 1200 ppm Fluid volume: 300 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 Garriss Date: 10/08/2012



1095286

Operator Name: McGowan Oil Company, a General Partnership Lease Name: Fulsom Well #: 1-2  
 Sec. 2 Twp. 35 S. R. 7  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 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:  Phased induction compensated neutron	<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>mississippi</td> <td>2835</td> <td>-1588</td> </tr> </table>	Name	Top	Datum	mississippi	2835	-1588
Name	Top	Datum					
mississippi	2835	-1588					

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	332	class a	125	3% calcium 1/4 lb flow sea

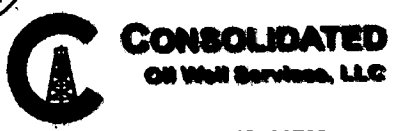
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ Plug Off Zone	-			

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 <i>(Explain)</i> _____	
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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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1



TICKET NUMBER 34683  
LOCATION Eureka  
FOREMAN Kevin McCoy

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

FIELD TICKET & TREATMENT REPORT

CEMENT APZ # 15-035-24475

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-25-12	5399	Fulsom # 1-2	2	35S	7E	Cowley
CUSTOMER McGowan Oil Co.			C & G DRIP R91			
MAILING ADDRESS 302 N. Summit						
CITY Arkansas City	STATE KS	ZIP CODE 67005				
JOB TYPE <u>P.T.A.</u> <input type="checkbox"/> HOLE SIZE <u>7 7/8</u> HOLE DEPTH <u>3260'</u> CASING SIZE & WEIGHT _____						
CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____			TRUCK # DRIVER TRUCK # DRIVER			
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____			485 ALAN M			
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____			667 CALIN H.			

REMARKS: Safety Meeting: Rig up to 4" DRILL pipe. Spot Cement Plugs As Following.

- 35 SKS @ 3193'
- 35 SKS @ 360'
- 25 SKS 60' to SURFACE
- 30 SKS R.H.

125 SKS TOTAL

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405 N	1	PUMP CHARGE	1030.00	1030.00
5406	75	MILEAGE	4.00	300.00
1131	125 SKS	60/40 Pozmix Cement	12.55	1568.75
1118 B	430 #	Gel 4%	.21	90.30
5407 A	5.38 TONS	75 miles Bulk Delv.	1.34	540.69
			Sub Total	3529.74
			SALES TAX 6.8%	112.82
			ESTIMATED TOTAL	3642.56

THANK YOU  
A 250164

Revin 3737

AUTHORIZATION [Signature] 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



ENTERED

TICKET NUMBER 34663

LOCATION Luraka

FOREMAN Steve Mead

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

FIELD TICKET & TREATMENT REPORT

CEMENT APT 15-035-24475

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY			
5-17-12	5399	Fulson # 1-2	2	355	7E	Cowley			
CUSTOMER		TRUCK #		DRIVER		TRUCK #		DRIVER	
McGowan Oil Company			485	Alan M.					
MAILING ADDRESS 302 N. Summit			667	Chris B.					
CITY		STATE	ZIP CODE						
Arkansas City		Ks	67005						

JOB TYPE Surface 0 HOLE SIZE 11" HOLE DEPTH 320' CASING SIZE & WEIGHT 5 3/4 23"  
CASING DEPTH 316' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 20'  
DISPLACEMENT 18 1/2 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 8 1/2 casing. Break circulation. Pump 70 bbls ahead.  
Mix 123 sks Class A Cement by 3% Caclz, 2% Gel & 1/4" Flo-Cele Perlite. Displace with  
18 1/2 bbls fresh water. Shut well in. Good cement returns to surface. 14261 Slurry  
to pit. Job Complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	75	MILEAGE	4.00	300.00
11043	123 sks	Class A Cement	14.95	1868.75
1102	350*	Caclz. 3%	.74	259.00
1118B	236*	Gel 2%	.21	49.35
1107	30*	Flo-Cele 1/4" perlite	2.35	70.50
5407A	5.88	Ten Mileage Bulk Truck	1.34	590.94
			Sub Total	3963.54
			SALES TAX 6.8%	152.84
			ESTIMATED TOTAL	4116.38

Ravin 3737

AUTHORIZATION [Signature]

249919

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