



KANSAS CORPORATION COMMISSION 1096223
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 # 32198
Name: PetroSantander (USA) Inc.
Address 1: 6363 WOODWAY DR STE350
Address 2: _____
City: HOUSTON State: TX Zip: 77057 + 1798
Contact Person: Liliana Hernandez
Phone: (713) 784-8700
CONTRACTOR: License # 33784
Name: Trinidad Drilling Limited Partnership
Wellsite Geologist: Rene Husted
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 #: _____
05/04/2012 05/13/2012 5/31/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-055-22140-00-00
Spot Description: _____
NE SW NW NW Sec. 18 Twp. 21 S. R. 34 East West
728 Feet from North / South Line of Section
528 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Finney
Lease Name: FOSTER Well #: 1-18R
Field Name: Christabelle
Producing Formation: Morrow
Elevation: Ground: 3064 Kelly Bushing: 3074
Total Depth: 5000 Plug Back Total Depth: 4954
Amount of Surface Pipe Set and Cemented at: 520 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 2004 Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 2004 w/ 225 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 8000 ppm Fluid volume: 400 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 Gertson Date: 10/11/2012



1096223

Operator Name: PetroSantander (USA) Inc. Lease Name: FOSTER Well #: 1-18R
 Sec. 18 Twp. 21 S. R. 34 East West County: Finney

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: Attached	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Attached Attached Attached
---	---

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	520	65/35 Poz and corr	300	lead: 150 sxs 65/35 Poz, 6%gel, 3%cc; t
Production	7.875	5.5	15.5	4995	com and 60/40 Poz	675	slg I: 225 sxs com; slg II: 450 sxs 60/40

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
4	4848 - 4874		

TUBING RECORD: Size: <u>2.875</u> Set At: <u>4821</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>05/31/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>20</u>	Gas Mcf _____	Water Bbls. <u>2010</u> 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 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) _____	PRODUCTION INTERVAL: <u>4848</u> <u>4874</u>
---	--	--

Form	ACO1 - Well Completion
Operator	PetroSantander (USA) Inc.
Well Name	FOSTER 1-18R
Doc ID	1096223

All Electric Logs Run

DIL
CNL
CDL
MEL

Form	ACO1 - Well Completion
Operator	PetroSantander (USA) Inc.
Well Name	FOSTER 1-18R
Doc ID	1096223

Tops

name	Top	Datum
Heebner Shale	3902	-838
Lansing	3992	-928
Marmaton	4464	-1400
Pawnee	4527	-1463
Cherokee Shale	4603	-1539
Morrow Shale	4804	-1740
Morrow Sand	4842	-1778
St. Genevieve	4884	-1820



CONSOLIDATED
Oil Well Services, LLC

5 MAY 2012

TICKET NUMBER 34506
LOCATION Oakley KS
FOREMAN Walt Dinkel

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
5-5-12		Foster 1-18	18	215	34 W	Finney	
CUSTOMER Petrosantander USA, Inc			Scott City				
MAILING ADDRESS			South to C.L. 10 W				
CITY		STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
				463	Bash Gulde		
				466-T129	Les Fliun		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 520' CASING SIZE & WEIGHT 8 5/8 -
 CASING DEPTH 520' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8-12.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 15-20'
 DISPLACEMENT 32 1/2 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5-6 RPM

REMARKS: Safety Meeting, rig up on Trinidad #215, circ casing to bottom mixed 150 sks 6 5/8 35 poz, 6 gal, 3% CC, 1/4" Flo Seal, Tail in w/ 150 sks com 3% CC, 2 gal, released Plug & Displace 32 1/2 BBL H₂O (534'). Shut in.

Cement Did Circ
approx 12 BBL to Pit

Thank You
Walt + crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1,085 ⁰⁰	1,085 ⁰⁰
5406	50	MILEAGE	5 ⁰⁰	250 ⁰⁰
11045	150- SKS	Class A Cement	17 ⁶⁵	2,647 ⁵⁰
1131	150 40 SKS	6 5/8 40 poz	15 ¹⁰	2,265 ⁰⁰
1102	810 #	Calcium Chloride	.89	720 ⁹⁰
1118B	1,056 #	Bentonite Gel	.25	264 ⁰⁰
1107	38 #	Flo-Seal	2 ⁸²	107 ¹⁶
5407A	13.5	Ton Mileage Delivery	1 ⁶⁷	1,127 ⁵⁰
4132	1	8 5/8 Centralizers	82 ⁰⁰	82 ⁰⁰
4432	1	8 5/8 Wooden Plug	96 ⁰⁰	96 ⁰⁰
				8,645 ⁰⁰
		Loss 10% Disc		- 864 ⁵¹
				7,780 ⁵⁰
			SALES TAX	
			ESTIMATED	
			TOTAL	

Revin 3737

AUTHORIZATION George Anstett TITLE APF DATE 5-5-12

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.



CONSOLIDATED
Oil Well Services, LLC

12 MAY 2012

TICKET NUMBER 34482
LOCATION Oakley
FOREMAN Fuzz

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

FIELD TICKET & TREATMENT REPORT
CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
5-12-12	6335	Foster 1-18	18	21	34W	Finney																
CUSTOMER Pedrosantander USA			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>463</td> <td>CONY D</td> <td></td> <td></td> </tr> <tr> <td>439</td> <td>SOCH G</td> <td></td> <td></td> </tr> <tr> <td>466</td> <td>CADY R</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	463	CONY D			439	SOCH G			466	CADY R		
TRUCK #	DRIVER	TRUCK #					DRIVER															
463	CONY D																					
439	SOCH G																					
466	CADY R																					
MAILING ADDRESS																						
CITY																						
STATE																						
ZIP CODE																						

GAND
WOST
to 5/12
Rd
3W
3/4W

JOB TYPE 2-stage HOLE SIZE 7718 HOLE DEPTH 5000' CASING SIZE & WEIGHT 5"2 15.5
CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 13.8-12.5 SLURRY VOL 1.42-1.89 WATER gal/sk 6.9-10.8 CEMENT LEFT in CASING _____
DISPLACEMENT 118 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Trinidad 215. Rig up and circulate
LHR. Pump 5 BBL water, 500gal flush, 5 BBL water mix 225SKS OWC
w/5# Kol-seal, wash pump and lines. Drop plug and displace 70 BBLs
water 47 1/2 BBLs mud 700# 118# press land @ 1400# float hold
Drop DU Bomb with 10 min open DU Tool @ 1200# PSI. Circulate 4 hrs.
Pump 5 BBL water 20SKS mh - 30SKS RH. mix 450SKS 60/40 89% 1/4"
closeal. Wash pump and lines Drop plug and displace 48 1/2 BBL LHR
press 600# Close DU Tool @ 1700#. Cement did circulate 25-30 BBL
to pit.

Thanks Fuzz & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401c	1	PUMP CHARGE	3020 ⁰⁰	3020 ⁰⁰
5406	50	MILEAGE	5 ⁰⁰	250 ⁰⁰
5407A	32.1 ton	Tow Mileage Delivery	167	2680 ³⁵
1126	225SKS	OWC	22 ⁵⁵	5073 ⁷⁵
1131	500 SKS	60/40 POS	151 ⁰	7550 ⁰⁰
1118 B	3440 #	Bentouite	.25	860 ⁰⁰
1107	125 #	closeal	282	352 ⁰⁰
1110 A		Kol-seal	.56	630 ⁰⁰
4159	1	5"2. AFU Float shoe	413 ⁰⁰	413 ⁰⁰
4104	2	5"2. Baskets (W)	276 ⁰⁰	552 ⁰⁰
4130	10	5"2. Centralizers	58 ⁰⁰	580 ⁰⁰
4283	1	5"2. DU Tool with latchdown	3850 ⁰⁰	3850 ⁰⁰
1144G	500gal	mud Flush	1 ⁰⁰	500 ⁰⁰
		subtotal		26311 ⁶⁰
		less 10% disc		26311 ⁶⁰
		subtotal		23680 ⁴⁴
		SALES TAX		
		ESTIMATED TOTAL		

Revin 3737

AUTHORIZATION

TITLE Prod. Dept. Mgr.

DATE 5/13/12

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