



KANSAS CORPORATION COMMISSION 1096175  
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 # 4567  
Name: D. E. Exploration, Inc.  
Address 1: PO BOX 128  
Address 2: \_\_\_\_\_  
City: WELLSVILLE State: KS Zip: 66092 + 0128  
Contact Person: PHIL FRICK  
Phone: ( 785 ) 883-4057  
CONTRACTOR: License # 33715  
Name: Town Oilfield Service  
Wellsite Geologist: NONE  
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    05/09/2012    05/09/2012  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-121-29077-00-00  
Spot Description: \_\_\_\_\_  
NW\_NW\_NW\_NE Sec. 4 Twp. 19 S. R. 24  East  West  
5115 Feet from  North /  South Line of Section  
2425 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Miami  
Lease Name: Garberg Well #: A-14  
Field Name: BLACK  
Producing Formation: SQUIRREL  
Elevation: Ground: 821 Kelly Bushing: 821  
Total Depth: 480 Plug Back Total Depth: 410  
Amount of Surface Pipe Set and Cemented at: 21 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 437  
feet depth to: 0 w/ 74 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 20 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 Garrisor Date: 10/11/2012



1096175

Operator Name: D. E. Exploration, Inc. Lease Name: Garberg Well #: A-14  
 Sec. 4 Twp. 19 S. R. 24  East  West County: Miami

**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 checked="" type="checkbox"/> Yes <input 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:  GAMMA RAY/NEUTRON/CCL	<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>SQUIRREL</td> <td>354</td> <td>+467</td> </tr> </table>	Name	Top	Datum	SQUIRREL	354	+467
Name	Top	Datum					
SQUIRREL	354	+467					

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
SURFACE	12.25	8.625	25	21	PORTLAND	3	NA
PRODUCTION	6.75	4.5	10	437	50/50 POZ	74	SEE TICKET

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
3	354-364 - 31 PERFS - 3.375" DP 23 GR. ECG		

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. <u>07/17/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" 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 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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Craberg Farm: Miami County

KS State; Well No. A-14

Elevation 821

Commenced Spuding May 24 2012

Finished Drilling May 9 2012

Driller's Name Wesley Dollard

Driller's Name

Driller's Name

Tool Dresser's Name Brandon Stone

Tool Dresser's Name Colt Stone

Tool Dresser's Name

Contractor's Name TOS

4 19 24

(Section) (Township) (Range)

Distance from S line, 5115 ft.

Distance from E line, 2425 ft.

3 sacks  
1 core  
8 hrs

### CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
409.5		Baffle			
436.6		Float		4	1/2

### CASING AND TUBING RECORD

- 10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_
- 9 7/8" Set 21 \_\_\_\_\_ 8" Pulled \_\_\_\_\_
- 6 1/2" Set \_\_\_\_\_ 6 1/2" Pulled \_\_\_\_\_
- 4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_
- 2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_

Thickness of Strata	Formation	Total Depth	Remarks
0-15	soil-clay	15	
159	Shale	174	
1	Lime	175	
10	sand	185	
6	sand	191	grey no Oil
4	Lime	195	brown - good odor - poor bleed
6	shale	201	
7	Lime	208	
6	shale	214	
8	Lime	222	
15	shale	237	
4	Lime	241	
6	shale	247	
7	sand	254	no Oil
4	shale	258	
19	Lime	277	
7	shale	284	
3	Lime	287	
62	shale	349	
6	sandy shale	355	
19	core	374	
41	shale	415	
25	sand	440	grey - no Oil
40	shale	480	TD





**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

INVOICE

Invoice # 249716

Invoice Date: 05/11/2012 Terms: 0/0/30,n/30

Page 1

D.E. EXPLORATION  
DOUG EVANS  
P.O. BOX 128  
WELLSVILLE KS 66092  
(785) 883-4057

GARBERG A-14  
39761  
4-19-24  
05-09-2012  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	74.00	10.9500	810.30
1118B	PREMIUM GEL / BENTONITE	224.00	.2100	47.04
1111	SODIUM CHLORIDE (GRANULA	155.00	.3700	57.35
1110A	KOL SEAL (50# BAG)	370.00	.4600	170.20
1401	HE 100 POLYMER	.50	47.2500	23.63
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00
Description		Hours	Unit Price	Total
503	MIN. BULK DELIVERY	1.00	350.00	350.00
666	80 BBL VACUUM TRUCK (CEMENT)	3.00	90.00	270.00
675	CEMENT PUMP	1.00	1030.00	1030.00
675	EQUIPMENT MILEAGE (ONE WAY)	45.00	4.00	180.00
675	CASING FOOTAGE	437.00	.00	.00

Parts: 1153.52 Freight: .00 Tax: 87.09 AR 3070.61  
Labor: .00 Misc: .00 Total: 3070.61  
Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4914





**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 39761  
LOCATION Ottawa, KS  
FOREMAN Casper, Kennedy

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
5/9/12	2355	Garberg A-14	NW 4	19	24	M1
CUSTOMER						
DE. Exploration						
MAILING ADDRESS						
PO Box 128						
CITY		STATE	ZIP CODE			
Wellsville		KS	66090			
TRUCK #	DRIVER	TRUCK #	DRIVER			
481	Car Ken	ck				
666	Gar Moo	GM				
675	Kei Det	KD				
503	Dan Gar	DG				

JOB TYPE longstring HOLE SIZE 6 7/8" HOLE DEPTH 480' CASING SIZE & WEIGHT 4 1/2"  
CASING DEPTH 437' DRILL PIPE \_\_\_\_\_ TUBING battle - 410' OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 4 1/2" plug + 27'  
DISPLACEMENT 6.52 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5.6 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 1/2 gal HE-100 Polymer, mixed & pumped 100# Premium Gel followed by 30 bbls fresh water, mixed & pumped 74 sks 50/50 Pozmix cement w/ 2% gel, 5% salt, 5# Kal Seal per sk, flushed pump clean, pumped 4 1/2" rubber plug to battle w/ 6.52 bbls fresh water, cement to surface, pressured to 800 PSI, released pressure, shut in casing.

*[Handwritten signature]*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE		1030.00	
5406	45 mi	MILEAGE		180.00	
5402	437'	casing footage			
5407	Minimum	ton mileage		350.00	
5502C	3 hrs	80 Vac		270.00	
1124	74 sks	50/50 Pozmix cement		810.30	
1118B	224 #	Premium Gel		47.04	
1111	155 #	Salt		57.35	
1110A	370 #	Kal Seal		170.20	
1401	1/2 gal	HE-100 Polymer		23.63	
4404	1	4 1/2" rubber plug		45.00	
			7.55%	SALES TAX	87.09
				ESTIMATED TOTAL	3070.01

Form 9737

AUTHORIZATION No Co. Rep. on location TITLE 249716 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.