



KANSAS CORPORATION COMMISSION 1096139  
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     SLOW  
 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>04/11/2012</u>	<u>04/12/2012</u>	<u>04/12/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-121-29035-00-00

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

NW\_NW\_SW\_NE Sec. 4 Twp. 19 S. R. 24  East  West  
3795 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-4

Field Name: BLACK

Producing Formation: WAYSIDE, SQUIRREL

Elevation: Ground: 818 Kelly Bushing: 818

Total Depth: 460 Plug Back Total Depth: 448

Amount of Surface Pipe Set and Cemented at: 22 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: 448

feet depth to: 0 w/ 78 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 Garrison Date: 10/11/2012



1096139

Operator Name: D. E. Exploration, Inc. Lease Name: Garberg Well #: A-4  
 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>WAYSIDE</td> <td>175</td> <td>+643</td> </tr> <tr> <td>SQUIRREL</td> <td>350</td> <td>+468</td> </tr> </table>	Name	Top	Datum	WAYSIDE	175	+643	SQUIRREL	350	+468
Name	Top	Datum								
WAYSIDE	175	+643								
SQUIRREL	350	+468								

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	22	PORTLAND	3	NA
PRODUCTION	6.75	4.5	10	448	50/50 POZ	78	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	175-185 - 32 PERFS - 3.375" DP 23 GR. ECG		
3	350-358 - 25 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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Core		
		175
11	Broken Sand	186
6	Lime	192
		351
2	Sand	353
1	Sand	354
2	Sand	356
2	Sand	358
5	Shale	363

Garberg Farm: Miami County

KS State; Well No. A-4

Elevation 818

Commenced Spuding April 11 2012

Finished Drilling April 12 2012

Driller's Name Wesley Dollard

Driller's Name

Driller's Name

Tool Dresser's Name Brandon Stone

Tool Dresser's Name Ryan Ward

Tool Dresser's Name

Contractor's Name TOS  
4 19 24

(Section) (Township) (Range)  
Distance from S line 3795 ft.

Distance from E line 2425 ft.

3 sacks  
2 cores  
10 hrs

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
447.6		Flow		4 1/2	

CASING AND TUBING RECORD

- 10" Set 5/8 Pulled \_\_\_\_\_
- 8" Set 22 Pulled \_\_\_\_\_
- 6 1/2" Set \_\_\_\_\_ Pulled \_\_\_\_\_
- 4" Set \_\_\_\_\_ Pulled \_\_\_\_\_
- 2" Set \_\_\_\_\_ Pulled \_\_\_\_\_

Thickness of Strata	Formation	Total Depth	Remarks
0-21	soil-clay	21	
130	shale	151	
3	Lime	154	
7	shale	161	
5	red bed	166	
3	Lime	169	
5	sand	174	no Oil
1	sand	175	5% Oil - perf
17	core	192	
6	shale	198	
3	Lime	201	
13	shale	214	
5	Lime	219	
7	shale	226	
6	sandy shale	232	
4	shale	236	
4	Lime	240	
7	shale	247	
1	Lime	248	
5	sand	253	
4	shale	257	
16	Lime	273	
10	shale	283	
2	Lime	285	
17	shale	302	
4	Lime	306	
45	shale	351	

351

Thickness of Strata	Formation	Total Depth	Remarks
12	core	363	
55	shale	418	
22	sand	440	no oil
40	shale	480	TD

# Core

Thickness of Strata	Formation	Total Depth	Remarks
		175	
11	broken sand	186	good Oil - perf
6	Lime	192	no Oil

# Core

		351	
2	sand	353	Oil - perf
1	sand	354	no Oil
2	sand	356	broken - perf
2	sand	358	no Oil
5	shale	363	





**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 # 249138

Invoice Date: 04/18/2012 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-4  
36645  
4-19-24  
04-12-2012  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	78.00	10.9500	854.10
1118B	PREMIUM GEL / BENTONITE	231.00	.2100	48.51
1111	SODIUM CHLORIDE (GRANULA	151.00	.3700	55.87
1110A	KOL SEAL (50# BAG)	390.00	.4600	179.40
1401	HE 100 POLYMER	.50	47.2500	23.63
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00
4236	4 1/2" ALUMINUM BAFFLE P	2.00	57.0000	114.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	1030.00	1030.00
368 EQUIPMENT MILEAGE (ONE WAY)	40.00	4.00	160.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
558 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1320.51 Freight: .00 Tax: 99.69 AR 3140.20  
Labor: .00 Misc: .00 Total: 3140.20  
Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 36645

LOCATION Ottawa

FOREMAN Alan Maden

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/22/12	2355	Garberg A-4	NW 4	19	24	Mi
CUSTOMER <u>DE Exploration</u>			TRUCK #			
MAILING ADDRESS <u>P.O. Box 128</u>			DRIVER			
CITY <u>Wellsville</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66092</u>			TRUCK #			
JOB TYPE <u>long string</u>			DRIVER			
HOLE SIZE <u>6 3/4</u>			TRUCK #			
HOLE DEPTH <u>480</u>			DRIVER			
CASING DEPTH <u>447</u>			TRUCK #			
DRILL PIPE			DRIVER			
TUBING			TRUCK #			
OTHER			DRIVER			
SLURRY WEIGHT			TRUCK #			
SLURRY VOL			DRIVER			
WATER gal/sk			TRUCK #			
CEMENT LEFT IN CASING <u>yes, extra</u>			DRIVER			
DISPLACEMENT <u>7 bbl</u>			TRUCK #			
DISPLACEMENT PSI <u>800</u>			DRIVER			
MIX PSI <u>200</u>			TRUCK #			
RATE <u>4 bpm</u>			DRIVER			

REMARKS: Well crew meet. Established rate. Mixed & pumped 1/2 gal polymer followed by 100# gel. Mixed & pumped 2 bbl dye marker followed by 98 lbs 50/50 cement plus 5# Kolseal, 5% salt, 20% gel per sack. Circulated dye. Flushed pump, pumped plug to casing TD. Circulated 5 bbl cement, well hold 800 PSI. Closed valve set float.

TOS, Wes

Alan Maden

668  
3688  
3688  
58  
70

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	40	MILEAGE		160.00
5402	447	casing footage		
5407	min	ton miles		350.00
5502L	2	80 val		180.00
1124	78 sk	50/50 cement		854.10
118B	231 #	gel		48.51
111	151 #	Salt		55.87
110A	390 #	Kolseal		179.40
1401	1/2 gal	Polymer		35.43
4404	1	1 1/2 plug		45.00
4236	2	4 1/2 baffle for future wells		114.00
			SALES TAX	99.69
			ESTIMATED TOTAL	3140.20

24938

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