



KANSAS CORPORATION COMMISSION 1095986
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 # 5254
Name: Midco Exploration, Inc.
Address 1: PO BOX 1278
Address 2:
City: WESTMONT State: IL Zip: 60559 +
Contact Person: Earl J. Joyce, Jr.
Phone: (630) 655-2198
CONTRACTOR: License # 7023
Name: Klima Well Service, Inc.
Wellsite Geologist: N/A
Purchaser: N/A

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 (Cora, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: MIDCO Exploration, Inc.
Well Name: Biggs #1 OWWO; was SWD; conv to gas prod; terminated disposal
Original Comp. Date: 08/01/1977 Original Total Depth: 4705
 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 #: _____

05/09/2005 07/13/2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-095-00400-00-02
Spot Description: _____
NE NE SE Sec. 35 Twp. 28 S. R. 8 East West
2310 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: Kingman
Lease Name: BIGGS Well #: 1-35
Field Name: _____
Producing Formation: 4705
Elevation: Ground: 1611 Kelly Bushing: 1610
Total Depth: 05 Plug Back Total Depth: 4010
Amount of Surface Pipe Set and Cemented at: 120 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: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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: NAOMI JAMES Date: 10/08/2012



1095986

Operator Name: Midco Exploration, Inc. Lease Name: BIGGS Well #: 1-35
 Sec. 35 Twp. 28 S. R. 8 East West County: Kingman

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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Attached	Top Attached	Datum Attached
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 <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E. Logs Run:				
Cement Bond Log No new logs run				

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	0	8.625	0	127	0	100	
Production	0	5.5	0	4544	0	150	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3666-4090	Common A	75	

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
Attached	Attached	Attached	Attached

TUBING RECORD:	Size: <u>2.375</u>	Set At: <u>3960</u>	Packer At: <u>3960</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>08/03/2005</u>	Producing Method: <input checked="" 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
		50	200	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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> <input type="checkbox"/> Other (Specify)	PRODUCTION INTERVAL:
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Form	ACO1 - Well Completion
Operator	Midco Exploration, Inc.
Well Name	BIGGS 1-35
Doc ID	1095986

Tops

	Top	Bottom
Tong SD	3240	-1630
Br LM	3321	-1711
Lansing	3340	-1730
Mississippi	4056	-2456
Kind	4294	-2684
Viola	4427	-2817
Simp	4452	-2842
TD	4473	-2863

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Perforations

	Perforation Record	Material	
	4003-4010	cement CIBP	
2	4066-76 (cemented over)	1000 gal 15% clean up	
2	4068-76	600 gal 15% Double NE FE	
		1500 gal retarded 15% Double NE FE	
	Frac Job: 6000 gal / pad 12000 lbs	sand in 9000 gal PROFRAC 25 flush	
		with 750 gal Hydravis 25	