



KANSAS CORPORATION COMMISSION 1097358
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 # 34221
Name: Bauer Oil Investments, LLC
Address 1: 4370 W. 271st
Address 2: _____
City: LOUISBURG State: KS Zip: 66053 + _____
Contact Person: Josh Bauer
Phone: (913) 406-7957
CONTRACTOR: License # 4339
Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.
Wellsite Geologist: na

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 #: _____
09/24/2012 09/25/2012 09/25/2012
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-121-29248-00-00
Spot Description: _____
SW SE NW SE Sec. 7 Twp. 17 S. R. 25 East West
1490 Feet from North / South Line of Section
1890 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Miami
Lease Name: Maschler Well #: 31
Field Name: _____
Producing Formation: Peru
Elevation: Ground: 985 Kelly Bushing: 989
Total Depth: 430 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 20 w/ 5 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 1500 ppm Fluid volume: 80 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: 10/24/2012



1097358

Operator Name: Bauer Oil Investments, LLC Lease Name: Maschler Well #: 31
 Sec. 7 Twp. 17 S. R. 25 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 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: Gamma Neutron CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Peru
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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	9	7	10	20	portland	5	50/50 poz
production	5.625	2.875	8	415	portland	50	50/50 poz

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 (Explain) _____		
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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Cement tickets



More saving. More doing.™

8000 W. 135TH STREET
OVERLAND PARK, KS 66223 (913)8519961

2209 00004 34159 09/24/12 12:01 PM
CASHIER ANGELA - AH57HZ

811187010399 HUSKY KNIFE <A> 4.88
HUSKY 7-1/2" FOLDING KNIFE W/5 BLDE
051643046221 RATCHET TIE <A>
2"X27" RATCHET TIE DOWN, 10,000 LBS
2013.96 27.92
320212 92LB ASHLAND <A>
ASHGROVE 92.6LB TYPE I-II PORT CMNT
7008.57 599.90

70 Sacks

SUBTOTAL 652.70
SALES TAX 54.73
TOTAL \$687.43
XXXXXXXXXXXX1000 AMEX 587.43
AUTH CODE 507930/2045395 TA



2209 04 34159 09/24/2012 3421

RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON
A 1 90 12/23/2012
THE HOME DEPOT RESERVES THE RIGHT TO
LIMIT / DENY RETURNS. PLEASE SEE THE
RETURN POLICY SIGN IN STORES FOR
DETAILS.

BUY ONLINE PICK-UP IN STORE
AVAILABLE NOW ON HOMEDEPOT.COM.
CONVENIENT, EASY AND MOST ORDERS
READY IN LESS THAN 2 HOURS!

ENTER FOR A CHANCE
TO WIN A \$5,000
HOME DEPOT GIFT
CARD!

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and enter for a chance to win at:

www.homedepot.com/opinion

COMPARTA SU OPINION EN
UNA BREVE
ENCUESTA PARA LA OPORT
UNIDAD DE GANAR.

User ID:
70816 68611

Password:
12474 68607

Entries must be entered by 10/24/2012.
Entrants must be 18 or older to enter.
See complete rules on website. No
purchase necessary.

Maschler 31



More saving. More doing.™

8000 W. 135TH STREET
OVERLAND PARK, KS 66223 (913)8519961

2209 00041 58200 09/26/12 11:06 AM
CASHIER PHYLLIS - PCT7IY

ORDER ID: 2209-183388
RECALL AMOUNT 599.90

SUBTOTAL 599.90
SALES TAX 51.89
TOTAL \$651.79
XXXXXXXXXXXX3683 MASTERCARD 651.79
AUTH CODE 08721Z/0410271 TA

70 Sacks



2209 41 58200 09/26/2012 4456

THE HOME DEPOT RESERVES THE RIGHT TO
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BUY ONLINE PICK-UP IN STORE
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and enter for a chance to win at:

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COMPARTA SU OPINION EN
UNA BREVE
ENCUESTA PARA LA OPORT
UNIDAD DE GANAR.

User ID:
118898 116730

Password:
12476 116689

Entries must be entered by 10/26/2012.
Entrants must be 18 or older to enter.
See complete rules on website. No
purchase necessary.

Maschler 32



Dale Jackson Production Co.
 Box 266, Mound City, Ks 66056
 Cell # 620-363-2683
 Office # 913-795-2991



Well #: 31
Location: SW-SE-NW-SE S7 T17 R2SE
County: Miami
APN: 1490
TEL: 1890
API#: 15-121-29248-00-00
Started: 9-24-12
Completed: 9-25-12

Surface: 20' 7	Cemented: 5 sacks	Hole Size: 9 7/8
Longstring 423' 2 7/8 8rd	Cemented: <i>506x</i>	Hole Size: 5 5/8

SN: none	Packer:	TD: 430'
Plugged:	Bottom Plug:	

Well Log

Lease:	Maschler
Owner:	Bauer Oil Investments, LLC
OPR #:	34221
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
4	4	Top Soil			
6	10	Gravel and Clay			
5	15	Shale			
12	27	Lime			
10	37	Shale			
9	46	Sand (Dry)			
8	54	Shale			
1	55	Black Shale			
23	78	Shale			
5	83	Lime			
30	113	Shale			
8	121	Lime			
15	136	Shale			
30	116	Lime			
3	169	Black Shale			
6	175	Shale			
20	195	Lime			
4	199	Black Shale			
3	202	Lime			
4	206	Shale			
7	213	Lime			
11	224	Sandy Shale			
132	356	Shale			
1	357	Coal			
3	360	Light shale			
5	365	Sand (Dry)			
20.5	387.5	Shale			
.5	388	Lime			
2	390	Sandy Shale (Oil Sand Streaks)			
3	393	Oil Sand (Some Shale (Fair Bleed)			
1	394	Oil Sand (Shaley) (Oil & Water)			
3.5	397.5	Oil Sand (Fair Bleed)			
.5	398	Oil Sand (Shaley)(Fair Bleed)			
2	400	Oil Sand (Shaley) (Poor Bleed)			
4	404	Sandy Shale (Oil Sand Streak)			
13	417	Shale			
TD	430	Lime			