



KANSAS CORPORATION COMMISSION 1097758
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 # 33353
Name: Wiesner, Tom dba Tom's Oil
Address 1: 3108 E 13TH ST
Address 2:
City: HAYS State: KS Zip: 67601 + 9356
Contact Person: Tom Wiesner
Phone: (785) 628-1510
CONTRACTOR: License # 5184
Name: Shields Oil Producers Inc.
Wellsite Geologist: Roger Moses
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 #:

11/11/2011	11/17/2011	11/18/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-051-26219-00-00
Spot Description:
SW SW SE Sec. 17 Twp. 13 S. R. 20 East West
330 Feet from North / South Line of Section
2310 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Ellis

Lease Name: Henman Well #: 1

Field Name:

Producing Formation: NA

Elevation: Ground: 2206 Kelly Bushing: 2211

Total Depth: 3909 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 221 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: 4000 ppm Fluid volume: 280 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 Gantior Date: 10/23/2012



1097758

Operator Name: Wiesner, Tom dba Tom's Oil

Lease Name: Henman

Well #: 1

Sec. 17 Twp. 13 S. R. 20 East West

County: Ellis

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 Yes No Log Formation (Top), Depth and Datum Sample
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No Name Top Datum
 Cores Taken Yes No Anhydrite 1543 668
 Electric Log Run Yes No Heebner 3469 1258
 Electric Log Submitted Electronically Yes No Lansing 3507 1296
(If no, Submit Copy) Base KC 3750 1539
 List All E. Logs Run: Arbuckle 3860 1649

Dual Induction
 Micro
 Porosity

CASING RECORD New 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	10.75	8.625	23	221	Common	160	2% gel 3% CC

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				

PERFORATION RECORD - Bridge Plugs Set/Type
 Specify Footage of Each Interval Perforated

Shots Per Foot	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD: Size: Set At: Packer At: Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. Producing Method: Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify)

PRODUCTION INTERVAL:

ALLIED CEMENTING CO., LLC. 038369

Federal Tax I.

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT

DATE	SEC.	TWP.	RANGE	CALLED-OUT	ON LOCATION	JOB START	JOB FINISH
LEASE	WELL #	LOCATION			COUNTY	STATE	
OLD OR NEW (Circle one)							

CONTRACTOR	OWNER
TYPE OF JOB	CEMENT
HOLE SIZE	AMOUNT ORDERED
CASING SIZE	
TUBING SIZE	
DRILL PIPE	
TOOL	
PRES. MAX	
MEAS. LINE	
CEMENT LEFT IN CSG	
PERFS.	
DISPLACEMENT	

EQUIPMENT	
PUMP TRUCK CEMENTER	
# HELPER	
BULK TRUCK	
# DRIVER	
BULK TRUCK	
# DRIVER	
REMARKS:	

	SERVICE
	DEPTH OF JOB
	PUMP TRUCK CHARGE
	EXTRA FOOTAGE @
	MILEAGE @
	MANIFOLD @
	HANDLING @
	MILEAGE @
	TOTAL

CHARGE TO: _____

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL

PLUG & FLOAT EQUIPMENT	
	@
	@
	@
	@
	@
	TOTAL

SALES TAX (If App)

