

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1097758

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	API No. 1515-051-26219-00-00				
Name: Wiesner, Tom dba Tom's Oil Address 1: 3108 E 13TH ST	Spot Description: _SW_SW_SE _Sec. 17 _Twp. 13 S. R. 20East ✓ West				
Address 2: City: HAYS	330 Feet from North / ✓ South Line of Section				
Contact Person: Tom Wiesner Phone: (785) 628-1510	Footages Calculated from Nearest Outside Section Corner:				
CONTRACTOR: License # 5184					
Name: Shields Oil Producers Inc.	Lease Name: Henman Well #: 1				
Wellsite Geologist: Roger Moses	Field Name:				
Purchaser:	Producing Formation: NA				
Designate Type of Completion: ✓ New Well Re-Entry Workover	Elevation: Ground: 2206 Kelly Bushing: _2211 Total Depth: 3909 Plug Back Total Depth:				
Oil WSW SWD SIOW Gas V D&A ENHR SIGW OG GSW Temp. A CM (Coel Bed Methane) Cathodic	Amount of Surface Pipe Set and Cemented at: 221 Multiple Stage Cementing Collar Used? Yes V No				
If Workover/Re-entry: Old Well Info as follows:	feet depth to:				
Operator:	Drilling Fluid Management Plan				
Well Name:Original Total Depth: Original Comp. Date:Original Total Depth: Deepening	(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:				
Dual Completion Permit #:	I N				
SWD Permit #:	—· _ ·				
ENHR	•				
11/11/2011 11/17/2011 11/18/2011	County: Permit #:				
Spud Date or Date Reached TD Completion Date or Recompletion Date	!				

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
☐ Confidential Release Date: ✓ Wireline Log Received
✓ Geologist Report Received ☐ UIC Distribution
ALT I I II Approved by; Deanna Gamisor Date: 10/23/2012

Side Two



1097758

Operator Name: Wie	sner, Tom dba i	Tom's Oil	Lease Na	_{ame:} Henman		Well #: 1	
Sec. 17 Twp.13	s. R. 20	East 🗸 West	County:	Ellis	-		
INSTRUCTIONS: Sho time tool open and clos recovery, and flow rate line Logs surveyed. At	sed, flowing and shi s if gas to surface to	ut-in pressures, whethe est, along with final cha	er shut-in pressu	re reached static I	level bydrostatic i	nressures hottom	hala tamparatura, fluid
Drill Stem Tests Taken (Attach Additional Si	heets)	Yes <u>✓</u> No		✓ Log Form	nation (Top), Dep	th and Datum	Sample
Samples Sent to Geolo	ogical Survey	_ Yes _ ✓ No		Name		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted	: 1	Anhydrite Heebner Lansing		1543 3469 3507	668 1258 1296		
(If no, Submit Copy)				Base KC		3750	1539
List All E. Logs Run: Dual Induction Micro Porosity			,	Arbuckle		3860	1649
	ļ ·			✓ New Used			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft		Type of Cement		Type and Percent Additives
Surface	10.75	8.625	23	221	Common	160	2% gel 3% CC
		ADDITION	AL CEMENTING	/ SQUEEZE RECO	nen .		
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Us			and Percent Additives	
Protect Casing Plug Back TD Plug Off Zone	- -		1				
			·	i <u>-</u>			
Shots Per Foot	PERFORATION Specify F	ON RECORD - Bridge Pleotage of Each Interval F	ugs Set/Type 'erforated	Acid,	Fracture, Shot, Cer (Amount and Kind of	ment Squeeze Recor of Material Used)	d Depth
			··· · · · · · · · · · · · · · · · · ·				:
							-
TUBING RECORD;	Size;	Seł At:	Packer At:	Liner Run;	Yes	No	
Date of First, Resumed Pri	oduction, SWD or ENF	HR. Producing Me	ethod: Pumping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil E	lbls. Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION	OF GAS:		METHOD OF CO			PRODUCTIO	ON INTERVAL:
Vented Sold (If vented, Submit	Used on Lease	Open Hole	Perf ι (Sι		Commingled Submit ACO-4)		

ALLIED CEMENTING CO., LLC. 038369

REMITTO P.O. BOX 31

SERVICE POINT

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