

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1098608

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 #55	552		APł No. 15 - 15-137-20611-00-00
Name: Gore Oil Compa	anv		Spot Description:
Address 1: 202 S ST FRAN	ICIS		NE_NW_NW_NW Sec. 18 Twp. 5 S. R. 21 East 1 West
Address 2: PO BOX 2757			125 Feet from V North / South Line of Section
City: WICHITA	State: KS Zip	67202 + 4518	430 Feet from East / West Line of Section
Contact Person: Larry M. J	ack		Footages Calculated from Nearest Outside Section Corner:
Phone: (316) 263-35	35		□ne ☑nw □se □sw
CONTRACTOR: License #_	34233		County: Norton
Name: Maverick Drilling L			Lease Name: Noone Well #: 9 SWD
Wellsite Geologist: n/a			Field Name:
Purchaser: n/a			Producing Formation: Cedar Hills
Designate Type of Completion	1:		Elevation: Ground: 2084 Kelly Bushing: 2092
	-	Workover	Total Depth: 1760 Plug Back Total Depth: 1727
	✓ swd	_ □ siow	Amount of Surface Pipe Set and Cemented at: 304 Feet
☐ Gas ☐ D&A	☐ ENHR	□ sigw	Multiple Stage Cementing Collar Used? ☐ Yes ✓ No
☐ OG	☐ gsw	Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)			If Alternate II completion, cement circulated from:
Cathodic Other	(Core, Expl., etc.):		feet depth to:w/sx cmt
If Workover/Re-entry: Old We	Il Info as follows:		W/
Operator:			Dellin - Florid Management Disc
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:	Original Tot	al Depth:	Chloride content: 50000 ppm Fluid volume: 500 bbls
Deepening Re	perf. Conv. to E	ENHR Conv. to SWD	Dewatering method used: Hauled to Disposal
	Conv. to	GSW	Dewatering metriod used.
Pług Back:	Plug	Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled	Permit #:		Operator Name: Gore Oil Company
Dual Completion	Permit #:		Lease Name: Stenger License #: 5552
SWD	Permit #:		
ENHR	Permit #:		Quarter SE Sec. 11 Twp. 5 S. R. 22 East Wes
☐ GSW	Permit #:		County: Norton Permit #: D-27500
10/01/2012 10/	04/2012	10/24/2012	
Spud Date or Date Recompletion 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
Date:
Confidential Release Date:
✓ Wireline Log Received
Geologist Report Received
✓ UIC Distribution
ALT I II Approved by: Deanna Garrison Date: 10/31/2012

Side Two



Operator Name: Go	re Oil Company		Lease N	Name: _	Noone		Well #:9 S	SWD	
Sec. 18 Twp.5	County:	: Norte	on						
time tool open and clo	osed, flowing and shu es if gas to surface to	nd base of formations p ut-in pressures, whether est, along with final char Il well site report.	r shut-in press	sure rea	sched static level	l, hydrostatic pres	ssures, bottom h	nole temper	rature, fluid
Drill Stem Tests Taker (Attach Additional		Yes / No			•	on (Top), Depth a	_		ample
Samples Sent to Geo	logical Survey	✓ Yes		Name Anhydrite			Top Dat 1696 +396		atum 96
Cores Taken Electric Log Run		☐ Yes	✓ Yes						
List All E. Logs Run:									
Dual Receiver Cement Bo Gamma-Ray Neutron CCL									
		CASIN	NG RECORD	I N	ew Used				
	Size Hole	Report all strings se	et-conductor, sur Weig		termediate, produc	tion, etc.	# Sacks	Time	
Purpose of String	Drilled	Set (In O.D.)	Lbs. /		Depth	Cement	# Sacks Used		nd Percent ditives
Surface	12.25	8.625	23		304	Class A	225		
Production	7.25	5.5	15.5		1753	Class A	325		
		ADDITION	IAI CEMENTIN	 JG / SOL	UEEZE RECORD				
Purpose: —— Perforate	Depth Top Bottom	Type of Cement					e and Percent Additives		
Protect Casing Plug Back TD Plug Off Zone	-								
Shots Per Foot		ION RECORD - Bridge Pl Footage of Each Interval P				acture, Shot, Ceme Amount and Kind of M		d	Depth
2	1250-1300								
TUBING RECORD:	Size: 2.875	Set At: 1228.75	Packer At: 1236	:	Liner Run:	Yes V	0		
Date of First, Resumed	Production, SWD or EN	NHR. Producing Mo	lethod:	g 🔲	Gas Lift (Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Wat	er E	3bls.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		METHOD OF I	COMPLI	ETION:		PRODUCTIO	ON INTERVA	
Vented Sold	Used on Lease	Open Hole	Perf.	Dually	y Comp. 🔲 Co	mmingled			
(If vented, Sub	omit ACO-18.)	Other (Specify)		(Submit)	ACO-5) (Sub	omit ACO-4) —			



ticket number 37182 LOCATION DEKIEV KS FOREMAN KELLY Gabe

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-9676 **FIELD TICKET & TREATMENT REPORT**

20-431-9210 o	r 800-467-8676	5		CEMEN	IT			13.7
DATE	CUSTOMER#	WELL	NAME & NUN	BER	SECTION	TOWNSHIP	RANGE	COUNTY
10-2-12	3373	Noone	#4	SWD	18	5	21	Norto
CUSTOMER	Gore.			Densus	TRUCK#	DISS. STO	T D1.00.5 "	
AILING ADDRE	SS S			1/25	399	DRIVER	TRUCK#	DRIVER
				E + 5	530	Danon/ Wes F	1	
ITY		STATE	ZIP CODE	into	2.30	The State of the S		<u> </u>
6		i						
OB TYPE 50	rface	HOLE SIZE 12	3/4	 _ HOLE DEPTI	H 30.5	CASING SIZE &	WEIGHT 2	85/420
ASING DEPTH_	305	DRILL PIPE		 TUBING			OTHER	
LURRY WEIGHT	148	SLURRY VOL		WATER gal/s	sk	CEMENT LEFT in		
ISPLACEMENT	18661	DISPLACEMENT	'PSI	MIX PSI		RATE		•
EMARKS: 乡q	yetx v	reeting	Cios	ed 45	$> on \Lambda$	laveric	K#108	5 hood
1P +0	circu	late, in	J X ZX	225	SKS CC	<u>om 3%cc</u>	2909	le)
7,725(c	aced 10	1+4,18	3001	wate	C, shu	tin, k	ashed	1047
Jump.	alino-	5,0199	ed d	י מכנזכ		· · · · · · · · · · · · · · · · · · ·		
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4550-	V -talat				<u>emen</u>	4999	6 ! LC1	1940
rppro	<u>x 7001</u>	topi+		*		57 L	- 100	
							BIR I	<u>ou</u>
ACCOUNT	OLIANET.		·				y oc	
CODE	QUANITY	OF UNITS	D	ESCRIPTION of	f SERVICES or PI	RODUCT	UNIT PRICE	TOTAL
54015	<u> </u>	i	PUMP CHAR	GE			108500	1085°
5406			MILEAGE		 		500	35000
1045		35K4		5Ace			1765	397/3
1102		4 生			chlorid	<u> </u>	.89	564 zk
गा88	4/2	3.#±	13en+	onite	2		125	10575
				4				
5407A		56	Ton 1	Milers	ze del	ivery	157	1234 8
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							79. PON	657995
n 3737			· · · · · · · · · · · · · · · · · · ·			Territoria.	SALES TAX ESTIMATED	- 3/44.4°
1130A/	η _						TOTAL	6874.44
THORIZTION_				TITLE TO	oolpush.	4 1	DATE /0-	2-/2

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.

253372

a	CONSOLIDATED OF WAR SUPPLY S
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AUTHORIZTION

TICKET NUMBER 37209

	The second of the	-			LOCATION_	_Ock	lay Ks
PO Box RR4 C	Chanute, KS 66720	FIFI D TICKE	T O TOO		FOREMAN_	- lule 1	+ Dinkel
620-431-9210 DATE	or 800-467-8676	FIELD TICKE	CEME		ORT	Kelly	Gable
		WELL NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
10-3-12 CUSTOMER	13373 No	20ne #9	SUD	18	5-5	210	
6	inse oil		Dasmo				Noctor
MAILING ADDR	ESS				DRIVER	TRUCK#	DRIVER
			1/25	05	Cory	Danes	
CITY	STATE	ZIP CODE	EHS	528-707	Jerry	Vates	
			luto				
JOB TYPE	HOLE SIZE	748	I HOLE DEPT	H_1760'		<u> </u>	
CASING DEPTH	1765' DRILL PIPE		TUBING	"	Casing Size &		6 15.5
SLURRY WEIGH		OL	WATER gal/s	sk		OTHER	00/
DISPLACEMENT	41 /4 DISPLACE		MiX PSI		CEMENT LEFT I		22'
REMARKS: 5	afty Mostura.	ricus on	4		RATE	BPM.	
Castrali	2003, 1-4-7-10	-12-18-17-	_	1 /	run Fla	et toup	2402 T
_Kottom,	Kumo 500cal	Fla-chark	mix	OF Chr.	18+25	CINC C	asur on
<u>, , , , , , , , , , , , , , , , , , , </u>			7	40 3E3 /4 /	LA, 15 51	3 ver telet	 _
							
							
				Kelly -	- thank,	You	
ACCOUNT CODE	QUANITY or UNITS	DES	CRIPTION	SERVICES or PROD	-Walt	tcrew)	
5401C				SERVICES OF PROD	DUCT	UNIT PRICE	TOTAL
5406	50	PUMP CHARGE				169500	1,68500
11045		MILEAGE	1 0			500	25,00
lili A	365 SG	Cless	A Com	naux		17.65	6.44225
1102	01/4	Sochow	matro	- 1		240	2.12640
1101	686#		u Chlor	ide		-89	824 14
1107	91#	Cal So				.49	33/14
407A	17.14	Flo-Sec	\			282	256 62
	- 14	Tou Wil	ego T	Palmer		167	1433 00
4159		SE-AF	U Flo	ct Skno		41300	111500
4454		5/2- Late	Le Dans	et Shoo et Shoo et Mus Hss et malizes		30300	302 00
4134		3/2-Tur	bo-Ca	tro/12= <	/	7200	303 € 576 €
4104		5%- 330-	Kats			2769	55200
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	Λ · Λ	- -					5,207.55 1520.26 3,686.79
3737	/ 					SALES TAX	750 50
•	/ / \ ~~ 11						1/ E Ja: 27

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

TITLE_

253378

ESTIMATED TOTAL