

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1100012

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 # 627	9		API No. 15 - 15-207-28113-00-00
Name: Patrick Developm	ent Corporation	1	Spot Description: NE 1/4
Address 1: 3408 W 93 RD			NW_SE_NW_NE Sec. 19 Twp. 26 S. R. 17 ✓ East West
Address 2:			4300 Feet from North / ✓ South Line of Section
City: LEAWOOD	State: KS	Zip: 66206 + 2005	1750 Feet from 🗸 East / West Line of Section
Contact Person: KerryPatrick Phone: ( 913 ) 381-2814			Footages Calculated from Nearest Outside Section Corner:  ☐ NE ☐ NW ✓ SE ☐ SW
CONTRACTOR: License # 33	734		County: Woodson
Name: Hat Drilling LLC			Lease Name: S EARL GREY Well #: PDC #2
Wellsite Geologist: none			Field Name: Perry Halligan
Purchaser:			Producing Formation: squirrel
Designate Type of Completion:			Elevation: Ground: 1003 Kelly Bushing: 1013
✓ New Well	e-Entry	Workover	Total Depth: 885 Plug Back Total Depth: 879
✓ Oil WSW  Gas D&A  OG  CM (Coal Bed Methane)  Cathodic Other (Coal	SWD ENHR GSW  ore, Expl., etc.):	SIOW SIGW Temp. Abd.	Amount of Surface Pipe Set and Cemented at:  Multiple Stage Cementing Collar Used?  Yes No  If yes, show depth set:  Feet  If Alternate II completion, cement circulated from:  879
If Workover/Re-entry: Old Well I	nfo as follows:		feet depth to: 879 w/ 135 sx cmt.
Operator:			
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Re-per	-	ENHR Conv. to SWD	Chloride content: 0 ppm Fluid volume: 100 bbls  Dewatering method used: Evaporated
Plug Back:		ug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled			Operator Name:
Dual Completion			Lease Name: License #:
SWD			Quarter Sec. Twp. S. R. East West
GSW	Permit #: Permit #:		
04/15/2012 04/16/		04/16/2012	County: Permit #:
53 ON (SCE)	ached TD	Completion Date or	

## **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

	Letter of Confidentiality Received
	Date:
	Confidential Release Date:
$\checkmark$	Wireline Log Received
	Geologist Report Received
	UIC Distribution
ALT	☐ I ✓ II ☐ III Approved by: Deanna Garrison Date: 11/09/2012

Side Two



1100012

Operator Name: Pa	trick Developm	ent Corporation	) Leas	se Name:	S EARL G	REY	Well #: F	PDC #2	
Sec. 19 Twp.26 S. R. 17 V East West			Vest Cou	County: Woodson			vven #.		
INSTRUCTIONS: Stime tool open and clarecovery, and flow rate line Logs surveyed. A	es if gas to surface	test, along with fir	nal chart(s) Attac	Detail al essure re ch extra s	I cores. Report eached static level heet if more spa	all final copies of rel, hydrostatic pro ace is needed. At	drill stems test essures, botton tach complete	s giving interval n hole temperatu copy of all Electi	tested ire, flu ric Wir
Drill Stem Tests Taker (Attach Additional		Yes	✓ No	<b>V</b>	Log Forma	tion (Top), Depth	and Datum	Samp	ole
Samples Sent to Geological Survey Yes ✓ No			✓ No	Na	me		Тор		
Cores Taken Electric Log Run Electric Log Submitter (If no, Submit Copy		Yes  Yes  Yes	No No No						
List All E. Logs Run: Cornish Wireline				Squi	rrel		821	831	
			213						
			CASING RECORD rings set-conductor,		lew / Used termediate, produ	ction etc			
Purpose of String	Size Hole Drilled	Size Casin Set (In O.D	g We	eight s. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Pe	
Surface	8.625	7	23.57		20	Portland	6	Additive	5
Production	5.825	2.82	6.5		879	50/50 Pos	135	2% gel	
		ADD	ITIONAL CEMENT	INC / SO	IFF7F DECOR	_			
Purpose:	Depth Top Bottom	300	Type of Cement # Sacks						
Protect Casing Plug Back TD Plug Off Zone	822-829								
Shots Per Foot	PERFORAT	ION RECORD - Brid	dge Plugs Set/Type		Acid, Fra	acture, Shot, Cemer	nt Squeeze Recor	rd.	
	Specify	Footage of Each Inte	erval Perforated		(A	mount and Kind of M	aterial Used)		pth
FUBING RECORD:	Size:	Set At:	Packer Al	t:	Liner Run:	Yes No			
ate of First, Resumed Pr	oduction, SWD or EN	HR. Produci	ng Method: ving Pumping	g []	Gas Lift 0	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	s Mcf	Wate			Gas-Oil Ratio	Gravit	ty
DISPOSITION  Vented Sold  (If vented, Submit	Used on Lease	Open Hole		COMPLE Dually (	Comp. Con	nmingled nit ACO-4)	PRODUCTIO	N INTERVAL:	



LOCATION OXX

PO Box 884,	Cha	nute,	KS	66720
620-431-9210				

DATE  4/17/12  CUSTOMER  Pax  MAILING ADDRI  340  CITY  Leaws  JOB TYPE Lo	6316 So. Ea	CEMEN ELL NAME & NUMBER  VI GYOY PDC-2  MY COYP	SECTION  NF 19	TOWNSHIP	RANGE	COUNTY
CUSTOMER Pax MAILING ADDRI 340 CITY Leaws	ESS Developme				17	-
Pax MAILING ADDRI 340 CITY Leaws	E55	nx Corp	型	SECTION AND PROPERTY.	TAXABLE DAY OF THE PARTY OF THE	
340 CITY Leaws	E55	AND COAP				CONTRACTOR STORY
CITY Leaws	8 W 93 14 SH		TRUCK#	DRIVER	TRUCK#	DRIVER
CITY Leaws			506	FREMAD		Air nos
Leawe JOB TYPE Lo	STATE .	ZIP CODE	495	NARBEC	HB.	9 1.
JOB TYPE Lo-	and Ks	12.00	369	DERMAS	DM:	10
	HOLE SIZE	106706 HOLE DEPTH	<u> </u>	RYASIN	LR3	
	879 DRILL PIPE		785	CASING SIZE & V	VEIGHT 21/8	EUE
SLURRY WEIGH					OTHER	
DISPLACEMENT		· · · · · · · · · · · · · · · · · · ·		CEMENT LEFT In	CASING 2/2	="Plus
	to lo locali and and	NT PSI MIX PSI		RATE SBP	Δ	<u> </u>
M.S.	tablish Circulate Pump 136 &	Win Follow	up 100-4 P	veminu	Cel Flus	: h.
11114	1000	>103 00/30 /02	YVIIX CEMA	1.1 20	all Car	west.
Plue	SO Y TO CA. V-105 M	Puma + lines.	Cloni Di	m 11	28 4 11 1	bloop
	Casing L	D. Pressure	to 800 -120	il. Rele		5010
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				·	1 vante	
CODE	QUANITY or UNITS	DESCRIPTION of S	SERVICES of PROD	ист	LIMIT DDIA	
5401		PUMP CHARGE .			UNIT PRICE	TOTAL
5406	75 mi	MILEAGE		495	***	103000
5402	872			495		300 50
5407A	438.6	casine footogo	2			NK
5502C	3hr	Ton miles		558		58773
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3737	-		150	7.3%	SALES TAX ESTIMATED	111578

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