

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1100014

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 # 6279	·	-· - <u></u>	API No. 15 - 15-207-28114-00-00					
Name: Patrick Developme	ent Corporation		Spot Description: NE 1/4					
Address 1: 3408 W 93 RD	···		NW_NE_NW_NE Sec. 19 Twp. 26 S. R. 17 ✓ East West					
Address 2: City: LEAWOOD	State: KS Zip:	66206 + 2005	5110 Feet from North / South Line of Section 1750 Feet from East / West Line of Section					
Contact Person: Kerry patrick Phone: (913) 381-2814	· ——- ···—.		Footages Calculated from Nearest Outside Section Corner:					
CONTRACTOR: License #337			County: Woodson					
1141116.			Lease Name: S EARL GREY Well #: PDC #3					
Wellsite Geologist: None			Field Name:					
Purchaser:			Producing Formation: Squirrel					
Designate Type of Completion:			Elevation: Ground: 1007 Kelly Bushing: 1017					
✓ New Well Re	e-Entry [Workover	Total Depth: 849 Plug Back Total Depth:					
✓ Oil WSW Gas D&A OG CM (Coal Bed Methane) Cathodic ☐ Other (Cor	SWD ENHR GSW	SIOW SIGW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: 22 Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from:					
If Workover/Re-entry: Old Well In		· · · · · · · · · · · · · · · · · · ·	feet depth to: w/ sx cmt.					
Operator:		 -						
Well Name:Original Comp. Date: Re-perf	Original Tota	I Depth:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: 0 ppm Fluid volume: 100 bbls Dewatering method used: Evaporated					
Plug Back: Commingled Dual Completion SWD	Plug E Permit #: Permit #:		Location of fluid disposal if hauled offsite: Operator Name: License #:					
ENHR		: <u></u> !	Quarter Sec. Twp. S. R. East West					
[] GSW			County: Permit #:					
04/17/2012 04/18/2		04/18/2012						
Spud Date or Date Rea Recompletion Date		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 III Approved by: Dearns Gamson Date: 11/09/2012
Date; Approved by: Date;

Side Two



Operator Name: Patr	ick Developme	ent Corporation	Lease I	Name: S EA	RL GRI	EY	Well #:P	DC #3	
Sec. 19 Twp. 26	s. R. 17	East West		Woodson					
time tool open and clos	s if gas to surface	and base of formations hut-in pressures, wheth test, along with final ch al well site report.	ier shut-in nress	Suite reached s	static leve	l hudroctatia ara		balata a no.	
Drill Stem Tests Taken Yes ✓ No (Attach Additional Sheets)				✓ Log Formation (Top), Depth a			and Datum Sample		
Samples Sent to Geological Survey				Name			Тор	Datum	
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	Electronically	Yes No)						
List All E. Logs Run:			:	Squirrel	Squirrel 818 824				
Cornish Wireline			i						
	Size Hole	Report all strings		face, intermedia					
Purpose of String	Drilled	Size Casing Set (In O.D.)	Weigi Lbs./		etting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
Production	5.825	2.825	6.5	849		50/50 Pos	132	2% gel	
Surface	8.625	7	23.57	22		Portland	6		
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	ADDITION Type of Cement	WAL CEMENTIN # Sacks U	i	RECORD	Type and F	Percent Additives	i	
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated				Acid, Fracture, Shot, Cernent Squeeze Record (Amount and Kind of Material Used) Depth				
·								<u>-</u> <u>.</u>	
		·	<u>.</u>						
TUBING RECORD:	Size:	Set At:	Packer At:	Liner f	Run;	Yes No			
Date of First, Resumed Pro	oduction, SWD or EN	IHR. Producing M	lethod:	Gas Lift	 [] OI	ther (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Water	Bb	ls. G	ias-Oil Ratio	Gravity	
DISPOSITION Vented Sold (If vented, Submit	Used on Lease	Open Hole		OMPLETION: Dually Comp. Submit ACO-5)		mingled iit ACO-4)	PRODUCTIO	N INTERVAL;	



TICKET NUMBER 36670

LOCATION O Hawa KS

FOREMAN Fred Made

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

	T 22.22.22.22.22.22.22.22.22.22.22.22.22.						
DATE	CUSTOMER#		LL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
CUSTOMER	6316	S, Earl	Gray #PDC3	NE 19	26	17	wo
	Sck Deur	Jop nen	a Cand	TRUÇK#		BEARING SO	有一个人
MAILING ADDRI	ESS	2011102	7	566	DRIVER FREMAN	TRUCK#	DRIVER
3409	8 W 90	3 rd SX	. '	<u> </u>			y my
CITY		STATE	ZIP CODE	370	HARBEC KEICAR		
Lean	bee	KS	66206	\$358	MIKHAA		
JOB TYPE L		HOLE SIZE	5 % HOLE DEPTH			VEIGHT_2%	KDE.
CASING DEPTH	\$49	DRILL PIPE	TUBING		O, COMO OILL &	OTHER	200
SLURRY WEIGHT SLURRY VOL WATER gal/sk CEMENT LEFT II							11 Pluc
DISPLACEMENT	<u> 4,9 138</u> 4	DISPLACEMEN			<i>R</i> ATE <u> ک β</u> <i>P</i>		7
REMARKS: F	stablish 1	anno n	ate. Mix x Pu			cel Flush	
	x x Puno		5 KS 50/50 Ary		ent 2% (- 4	
to.	Sarface.	Flush	· Duma + 1 mes	Clean :	Disalana	78001	de X
plug	to case	TO.	Pressure to	800 # R	S/i Palac		0.00
700	sex fla	stx Va	lue Shitm (Casing	33030	S & PRIS	٠, ح
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Ha	4 Drills	% ~			Fuel	Marla	
		0			,		
ACCOUNT · CODE	QUANITY o	r UNITS	DESCRIPTION of S	ERVICES or PRO	DUCT	UNIT PRICE	TOTAL
540	<u> i </u>		PUMP CHARGE		495		103000
540 6	7 <u></u>	mi	MILEAGE .		¥95		300
5402	. 8.	19	Casing Foota	20			
5407A	41.5	5,8	Jan Miles		×558		10/C
5502C	3	brs	80 BBL Vac	Truck	ं देश		27000
·					· ·		20,70
							· · · · · ·
1124	. 13	32 s/4s	\$ 50/50 Por W	l'x Camer	*		144540
1118B		22#	Premiune Cel				
4402		1 .	J'z" Rubber A	7/102			67
· .			7.50 0 0 0 7	** }	-		2809
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uda 9797		\			7.3%	SALES TAX	11249
wb 8737 -	۸. ۵	/ .	MANNA			ESTIMATED .	
UTHORIZTION	1m Sts		OTIOUT			TOTAL	3810 P

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.