



KANSAS CORPORATION COMMISSION 1100897
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 # 34585
Name: Oil Sources Corp.
Address 1: 12508 CATALINA ST.
Address 2:
City: LEAWOOD State: KS Zip: 66209 + 2267
Contact Person: kevin kleweno
Phone: (913) 481-4604
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: kevin kleweno

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 #:
1/6/2012 1/7/2012 1/7/2012
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-059-25890-00-00
Spot Description:
NW SW NW NW Sec. 1 Twp. 16 S. R. 20 East West
4321 Feet from North / South Line of Section
5138 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Franklin
Lease Name: Crawford Well #: 103
Field Name:
Producing Formation: mississippi
Elevation: Ground: 961 Kelly Bushing: 0
Total Depth: 689 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 20 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: 1800 ppm Fluid volume: 80 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 Garrison Date: 11/15/2012



1100897

Operator Name: Oil Sources Corp. Lease Name: Crawford Well #: 103
Sec. 1 Twp. 16 S. R. 20 [X] East [] West County: Franklin

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 [X] No [] Log Formation (Top), Depth and Datum [] Sample
Samples Sent to Geological Survey [] Yes [X] No Name Top Datum
Cores Taken [] Yes [X] No see attached
Electric Log Run [] Yes [X] No
Electric Log Submitted Electronically [] Yes [] No (If no, Submit Copy)

List All E. Logs Run:

CASING RECORD [X] New [] Used

Report all strings set-conductor, surface, intermediate, production, etc.

Table with 8 columns: 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. Row 1: surface, 9.875, 7, 19.0, 20, portland, 4, 0

ADDITIONAL CEMENTING / SQUEEZE RECORD

Table with 4 columns: Purpose, Depth Top Bottom, Type of Cement, # Sacks Used, Type and Percent Additives. Rows for Perforate, Protect Casing, Plug Back TD, Plug Off Zone.

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

Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)

Table with 4 columns: Shots Per Foot, Perforation Record, Acid/ Fracture/ Shot/ Cement Squeeze Record, 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)

Table with 8 columns: Estimated Production Per 24 Hours, Oil Bbls., Gas Mcf, Water Bbls., Gas-Oil Ratio, Gravity.

DISPOSITION OF GAS:

METHOD OF COMPLETION:

PRODUCTION INTERVAL:

[] Vented [] Sold [] Used on Lease [] Open Hole [] Perf. [] Dually Comp. [] Commingled [] Other (Specify) (If vented, Submit ACO-18.) (Submit ACO-5) (Submit ACO-4)

