

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1099482

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 #_ 3267	<u>'9 </u>	<u></u>	API No. 1515-035-24360-00-00
Name: AAS Oil Co., Inc.			Spot Description:
Address 1: 2508 EDGEMONT	DR STE # 4		SE_NW_SW Sec. 20 Twp. 34 S. R. 3 FEast West
Address 2: City: ARKANSAS CITY	State: KS Zip	67005 + 3844	
Contact Person: Dennis K. Sh Phone: (620) 442-7940			Footages Calculated from Nearest Outside Section Corner:
CONTRACTOR: License # 328	354		County: Cowley
Name:Gulick Drilling Co., In		· · · · · · · · · · · · · · · · · · ·	Lease Name: MARRS Well #: 4
Wellsite Geologist: Mike Engelb	recht		Field Name: Gibson
Purchaser:			Producing Formation: Dry hole
Designate Type of Completion:			Elevation: Ground: 1144 Kelly Bushing: 1156
✓ New Well Re	e-Entry [Workover	Total Depth: 3440 Plug Back Total Depth:
V oil	SWD		Amount of Surface Pipe Set and Cemented at: 311
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 (Cor		<u> </u>	foot don'th to:
If Workover/Re-entry: Old Well In	fo as follows:		SA GIII.
Operator: Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:	Original Tota	al Depth:	
Deepening Re-perf	Conv. to E	NHR [_] Conv. to SWD	Chloride content: 3300 ppm Fluid volume: 500 bbls Dewatering method used: Evaporated
Plug Back:	Plug	Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled	Permit #:		Ongratas Names
Dual Completion		—·	
SWD			Lease Name: License #:
ENHR			Quarter Sec. Twp. S. R. East West
GSW			County: Permit #;
07/13/2010 07/18/2		07/18/2010	
Spud Date or Date Rea Recompletion Date		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

	KCC Office Use ONLY
	Letter of Confidentiality Received
	Date:
	Confidential Release Date:
7	Wireline Log Received
	Geologist Report Received
	UIC Distribution
ALT	VI II III Approved by: Deanna Garrisor Date: 11/13/2012

Side Two



Operator Name: AA	S Oil Co., Inc.		Lease N	Name: MARRS		Well #: . 4	
Sec. 20 Twp.34	s. R. <u>3</u>			Cowley			
INSTRUCTIONS: Sh time tool open and clo recovery, and flow rate line Logs surveyed. A	es if gas to surface	test, along with final	ither shut-in press	sure reached static lev	vel bydroetatic pro	ceuroe hottom l	giving interval tested, nole temperature, fluid py of all Electric Wire-
						· · · · · · · · · · · · · · · · · · ·	
Drill Stem Tests Taker (Attach Additional S		∐ Yes 🛂 l	No	✓ Log Forma	tion (Top), Depth a	and Datum	Sample
Samples Sent to Geol	logical Survey	✓ Yes	No .	Name KC		Тор 2874	Datum
Cores Taken		1				3016	1716 1860
Electric Log Run Electric Log Submitted	d Electronically	✓ Yesn ✓ Yesn		Bartlesville		3385	2229
(If no, Submit Copy)			Mississippi		3400	2244
List All E. Logs Run:			;				
Duel comp. Duel induction							
e e e e e e e e e e e e e e e e e e e			SING RECORD	✓ New Used			
	· = · • · · · · · · · · · · · · · · · ·			✓ NewUsed face, intermediate, produ	uction, etc.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weigh Lbs. / I		Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25	8.625	23	311	common	75	
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:	!				· · · · · · · · · · · · · · · · · · ·		
		ADDITIO	ONAL CEMENTING	G / SQUEEZE RECOR	' D	ا ا	
Purpose:	Depth Top Bottom	Type of Cement	# Sacks U	Jsed	Type and	Percent Additives	· · · · · · · · · · · · · · · · · · ·
Perforate Protect Casing	-		·——				
Plug Back TD Plug Off Zone		· · ·					
			·				
Shots Per Foot	PERFORAT Specify	ION RECORD - Bridge Footage of Each Interva	Plugs Set/Type al Perforated	Acid, F	racture, Shot, Cemen	t Squeeze Record	Depth
i							
<u> </u>						·· ·	
TUBING RECORD:	Size:	Set At;	Packer At:	Liner Run:			
Date of First, Resumed P	roduction, SWD or EN	NHR. Producing	Method:		Yes No		
· · . <u></u>		Flowing	***	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION	N OF GAS:		METHOD OF C	OMPLETION:		PRODUCTION	INTERVAL
Vented Sold	Used on Lease	Open Hole	Perf.	Dually Comp Co	mmingled	1102001101	THE CONTRACT
(If vented, Subm	nit ACO-18.)	Other (Specify		Submit ACO-5) (Sui	bmit ACO-4)		





TICKET NUMBER 28367
LOCATION EX UPLANO #80
FOREMAN ANDMAN

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

FIELD TICKET & TREATMENT REPORT

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	MOITS/NOHTU.	South 2	astern	<i>13</i>				DATE	CHEU. CHE

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.





TICKET NUMBER 28366
LOCATION ED DO MADO #80
FOREMAN LARAUSTAL

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

FIELD TICKET & TREATMENT REPORT

	or 800-467-8676			CEME	NT			
DATE	CUSTOMER#	WEL	L NAME & NU		SECTION	TOWNSHIP	RANGE	COUNTY
7-13-10	1091	Man	RS :	는 시				Cowley
CUSTOMER /	adx Da	2100			Marie La Paris	era Branda Brah		The Graph Market
MAILING ADDR	II 10 QZI	<u> </u>			TRUCK#	DRIVER	TRUCK #	DRIVER
ಎ 50%	Elgenne	L // 10	ST FU		485	MAR		
CITY ,		STATE	ZIP CODE		592	GENARY		
Mobres	SIRCY (DILL)	4	67005					***************************************
JOB TYPE	\$ 8	OLE SIZE	10:00		H 30.4		195	<u> </u>
CASING DEPTH		ORILL PIPE	14.7	HOLE DEPT		CASING SIZE &		<u> </u>
SLURRY WEIGH	4 .	SLURRY VOL.	20	TUBING	sk <u>6.45</u>		OTHER	
DISPLACEMEN		DISPLACEMEN				CEMENT LEFT	CASING SEL	
REMARKS:		ACCMEN	70	MIX PSI	1 050	RATE 4 boy		1-1-
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W		Name of the state		4				-
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1Vin 3737	-/ 	R-A-J	<i></i>		. ~~ 1	***************************************	SALES TAX	819.81
	1101	415	1	බ 3 ද්	1866		ESTIMATED TOTAL	5122.06

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