



KANSAS CORPORATION COMMISSION 1102897  
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 # 7160  
Name: Wrestler, David L., a General Partnership  
Address 1: 1776 GEORGIA RD  
Address 2:  
City: HUMBOLDT State: KS Zip: 66748 + 1500  
Contact Person: David Wrestler  
Phone: ( 620 ) 473-2324  
CONTRACTOR: License # 7160  
Name: Wrestler, David L., a General Partnership  
Wellsite Geologist: None

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 #:   
10/20/2012    10/25/2012    11/6/2012  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-001-30422-00-00  
Spot Description:  
E2 W2 NE NE Sec. 23 Twp. 26 S. R. 18  East  West  
660 Feet from  North /  South Line of Section  
825 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Allen  
Lease Name: Garry Daniels    Well #: 5  
Field Name:  
Producing Formation: Bartlesville  
Elevation: Ground: 987    Kelly Bushing: 0  
Total Depth: 855    Plug Back Total Depth:  
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: 830  
feet depth to: 0 w/ 100 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm    Fluid volume: 0 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 Garris Date: 11/29/2012



1102897

Operator Name: Wrestler, David L., a General Partnership Lease Name: Garry Daniels Well #: 5  
Sec. 23 Twp. 26 S. R. 18  East  West County: Allen

**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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bartlesville	830-855	25ft
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
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
Surface	12	8.6250	14	22	Portland	6	
Long String	5.6250	2.8750	8	830	Portland	100	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing	-			
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone	-			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

**TUBING RECORD:** Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. 11/06/2012

Producing Method:  Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	10		40		34

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: <u>830-85511/</u>
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**DRILLERS LOG**

Company: D&W oil

Contractor: DMJ OIL

Farm: Daniels

License # 7160

Well No: 5

County: Allen

API: 15-001-30422-00-00

Sec:23 TWP:26 Range: 18e

Surface Pipe: 22ft cement with 6 sacks

Location:660 from north line

Location:825 from east line

Spot: e/2 w/2 ne. ne.

Thickness	Formation	Depth	Remarks
4ft	top soil	4ft	
23ft	lime	27ft	
33ft	shale	60ft	
10ft	lime	70ft	
45ft	shale	115ft	
160ft	lime	275ft	K.C. lime
132ft	shale	427ft	
35ft	lime	462ft	40ft lime
20ft	sandy shale	482ft	
2ft	lime	484ft	
38ft	shale	522ft	
28ft	lime	560ft	30ft lime
33ft	shale	593ft	
19ft	lime	612ft	20ft lime
6ft	shale	618ft	
5ft	lime	623ft	5ft lime
87ft	shale	710ft	
2ft	lime	712ft	2ft lime
102ft	shale	814ft	
4ft	sand	818ft	odor light bleed
16ft	oil sand	834ft	good bleed
9ft	oil sand	853ft	very good bleed
2ft	sand coal mix	855ft	good bleed
855T.D.			
pipe T.D. 830ft.			

802 N. Industrial Rd.  
P.O. Box 664  
Iola, Kansas 66749  
Phone: (620) 365-5588

# Payless Concrete Products, Inc.

**CONDITIONS**

Concrete to be delivered to the nearest access to point over passable road, under truck's own power. Due to delivery of owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to roads, railways, driveways, buildings, trees, structures, etc., which are of customer's risk. The maximum allowed time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains contact water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request.

**NOTICE TO OWNER**  
Failure of the contractor to pay third persons supplying material or services to complete this contract can result in the filing of a mechanics lien on the property which is the subject of this contract.

TIME	FORMULA	LOAD SIZE	YARDS ORDERED		DRIVER/TRUCK		PLANT/TRANSACTION #
DATE		LOAD #	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER

**WARNING**

**IRRITATING TO THE SKIN AND EYES**

Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water. If Irritation Persists, Get Medical Attention. KEEP CHILDREN AWAY.

CONCRETE IS A PERISHABLE COMMODITY and BECOMES THE PROPERTY OF THE PURCHASER UPON LEAVING THE PLANT. ANY CHANGES OR CANCELLATION OF ORIGINAL INSTRUCTIONS MUST BE TELEPHONED TO THE OFFICE BEFORE LOADING STARTS.

The undersigned promises to pay all costs, including reasonable attorney's fees, incurred in collecting any sums owed.

All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum.

Not Responsible for Reactive Aggregate or Color Quality. No Claim Allowed Unless Made at Time Material is Delivered.

A 625 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.

Excess Delay Time Charged @ \$20/Hr.

**PROPERTY DAMAGE RELEASE**  
TO BE SIGNED IN DELIVERY TO BE MADE INSIDE CURB LINE

Dear Customer: The driver of this truck in processing the RELEASE to you for your signature is of the opinion that the size and weight of this truck may possibly cause damage to the premises and/or adjacent property if it places the material in this load where you desire it. It is our wish to help you in every way that we can, and to order to do this the driver is requesting that you sign this RELEASE, releasing him and his employer from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of this material, and that you also agree to help him remove mud from the wheels of his vehicle so that he will not enter the public street. Further, an occasional consideration from the undersigned agrees to indemnify and hold harmless the driver of this truck and the employer for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.

X

**Excessive Water is Detrimental to Concrete Performance**  
H<sub>2</sub>O Added By Request/Authorized By

GAL X

WEIGHMASTER

NOTICE MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.

LOAD RECEIVED BY

X

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
			1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. OTR (TRUCK) 9. OTHER	
LEFT PLANT	ARRIVED JOB	START UNLOADING		TIME DUE
	11:38			
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		DELAY TIME

ADDITIONAL CHARGE 1 \_\_\_\_\_  
ADDITIONAL CHARGE 2 \_\_\_\_\_  
**GRAND TOTAL** ▶