



KANSAS CORPORATION COMMISSION 1093479
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 # 32219
Name: McClenning, Mike dba Production Maintenance Service
Address 1: 405 N East ST
Address 2: PO BOX 275
City: TYRO State: KS Zip: 67364 +
Contact Person: Mike McClenning
Phone: (620) 289-4001
CONTRACTOR: License # 32219
Name: McClenning, Mike dba Production Maintenance Service
Wellsite Geologist: Mike McClenning
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 #: _____

<u>05/22/2012</u>	<u>05/23/2012</u>	<u>06/11/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-125-32216-00-00

Spot Description: _____
E2 W2 NE NW Sec. 2 Twp. 34 S. R. 14 East West
660 Feet from North / South Line of Section
3465 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Montgomery

Lease Name: Melander Well #: 5

Field Name: _____
Producing Formation: wayside

Elevation: Ground: 878 Kelly Bushing: 0

Total Depth: 788 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: 783
feet depth to: 0 w/ 110 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 Garrison Date: 11/26/2012



1093479

Operator Name: McClennig, Mike dba Production Maintenance Service Lease Name: Melander Well #: 5
 Sec. 2 Twp. 34 S. R. 14 East West County: Montgomery

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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
 (If no, Submit Copy)

List All E. Logs Run:

Gamma Ray, Cement Bond, VDL

Log Formation (Top), Depth and Datum Sample

Name Top Datum
 Wayside 627 +251

CASING RECORD New 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	11.75	8.625	22	22	Class A	6	none
Production	6.75	4.5	11.6	778	50/50 Poz mix	110	see ticket

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	655-675	13000# sand, 285 bbl water	655-675

TUBING RECORD:	Size: 2.375	Set At: 683	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. 6/13/2012	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. 1	Gas Mcf	Water Bbls. 40	Gas-Oil Ratio 31

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify)	PRODUCTION INTERVAL: 655-675
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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 34676

LOCATION Eureka

FOREMAN Rick Ledford

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

FIELD TICKET & TREATMENT REPORT

CEMENT API# 15-125-32216

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-23-12	6236	Melander #5	2	345	14E	MO
CUSTOMER <u>Production Maintenance Services</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>3922 CR 1250</u>			<u>520</u>	<u>John</u>		
CITY <u>Coffeyville</u>			<u>611</u>	<u>Joey</u>		
STATE <u>KS</u>			<u>92</u>	<u>ALAN C. (MAY TAG)</u>		
ZIP CODE <u>67337</u>						

JOB TYPE 4/5 0 HOLE SIZE 6 7/8" HOLE DEPTH 788' CASING SIZE & WEIGHT 4 1/2" 11.6#
 CASING DEPTH 778' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.9# SLURRY VOL 28 Bbl WATER gal/sk 6.0 CEMENT LEFT IN CASING 0'
 DISPLACEMENT 12.1 bbl DISPLACEMENT PSI 500 MWP PSI 1000 Pump plus RATE _____

REMARKS: Safety meeting - Rig up to 4 1/2" casing. Break circulation w/ 15 Bbl fresh water. Pump 8 sks gel-flush w/ hulls. 4 Bbl water spacer. shut down for 20 minutes. Mixed 110 sks 50/50 Ozomix cement w/ 4" Kol-seal, 3" cal-seal, 2% gel, 2% cacl2, 1% phenosol/2x & 1/2% CR-115 @ 13.9# / gal. yield 1.40. Washout pump + lines, release 4 1/2" rubber plug. Displace w/ 12.1 Bbl fresh water. Final pump pressure 500 PSI. Pump plug to 1000 PSI. wait 2 minutes, release pressure float & plug held. Good cement returns to surface = 5 Bbl slurry to pit. Job complete. Rig down.

"THANK YOU"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	60	MILEAGE	4.00	240.00
1124	110 sks	50/50 Ozomix Cement	10.95	1204.50
110A	440"	4" Kol-seal/2x	.46	202.40
1101	330"	3" cal-seal/1x	.40	132.00
111B	125"	2% gel	.21	38.85
1102	125"	2% cacl2	.74	136.90
1107A	110"	1% phenosol/2x	1.27	141.90
1135A	25"	1/4% CR-115	10.55	263.75
1118B	400"	gel-flush	.21	84.00
1105	50"	hulls	.44	22.00
5407A	4.60	600 mileage bulk rate	1.34	371.45
5502C	5 hrs	80 Bbl vac TR	90.00	450.00
1123	3300 gals	city water	16.80/1000	54.95
4404	1	4 1/2" top rubber plug	45.00	45.00
			Subtotal	4417.20
			6.3% SALES TAX	146.58
			ESTIMATED TOTAL	4563.78

Ravin 3737

Mike M. Clog

250143

AUTHORIZATION _____

TITLE _____

DATE _____

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.