

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1099168

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 # 8866	API No. 15 - 15-001-30480-00-00
Name: McFadden, Jack W. dba McFadden Oil Co.	Spot Description:
Address 1: PO BOX 394	N2 N2 S2 S2 Sec. 36 Twp. 24 S. R. 20 ▼ East West
Address 2:	
City: IOLA State: KS Zip: 66749 + 0394	
Contact Person: Jack McFadden	Footages Calculated from Nearest Outside Section Corner:
Phone: (620) 496-7946	□ NE □ NW ☑ SE □ SW
CONTRACTOR: License #8866	County: Allen
Name: McFadden, Jack W. dba McFadden Oil Co.	Lease Name: McCall Well #: 2Ax
Wellsite Geologist: N/A	Field Name:
Purchaser:	Producing Formation: Bartlesville
Designate Type of Completion:	Elevation: Ground: 1098 Kelly Bushing: 5
✓ New Well Re-Entry Workover	Total Depth: 850 Plug Back Total Depth:
	Amount of Surface Pipe Set and Cemented at: 20 Feet
☐ Oil ☐ WSW ☐ SWD ☐ SIOW ☐ Gas ☐ D&A	Multiple Stage Cementing Collar Used? Yes V No
GSW Temp. Abd.	
CM (Coal Bed Methane)	If yes, show depth set: Feet
Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to:w/sx cmt
Operator:	
Well Name:	Orilling Fluid Management Plan
Original Comp. Date: Original Total Depth:	(Data must be collected from the Reserve Pit)
	Chloride content: 0 ppm Fluid volume: 160 bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD ☐ Conv. to GSW	Dewatering method used: Evaporated
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	O
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec TwpS. R East West
GSW Permit #:	County: Permit #:
06/26/2012 06/28/2012 06/28/2012	
Spud Date or Pate Reached TD Completion Date or Recompletion Date 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 I III Approved by: Deanna Garrisor Date: 12/11/2012					

Side Two



Operator Name: McFa	adden, Jack W. (dba McFadden Oil	Co. Lease	Name: _	McCall		Well #:2A	х	
Sec. 36 Twp.24	s. R. <u>20</u>	✓ East	County	Allen		-			
INSTRUCTIONS: Shortime tool open and clos recovery, and flow rates line Logs surveyed. Att	ed, flowing and shu s if gas to surface te	ut-in pressures, whethe est, along with final cha	er shut-in press	sure read	ched static level,	hydrostatic pre	essures, bottom h	nole tempe	erature, fluid
Drill Stem Tests Taken (Attach Additional Sh	neets)	☐ Yes 🗸 No		□ Li	og Formation	n (Top), Depth	and Datum	s	Sample
Samples Sent to Geological Survey			Name Bartlesville			Top Da 814		Datum	
Cores Taken		□ Yes ☑ No		Caracovino			011		
Electric Log Run		✓ Yes No							
Electric Log Submitted (If no, Submit Copy)	•	✓ Yes No							
List All E. Logs Run:									
cornish									
			NG RECORD set-conductor, su	✓ Ne	w Used ermediate, producti	on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used		and Percent
surface	9.875	7	12		20	portland	4		
production	6.125	2.875	4.7		850	portland	114		
		ADDITION	NAL CEMENTIN	NG / SQL	JEEZE RECORD	ı			
Purpose:	Depth Top Bottom	Type of Cement	# Sacks	# Sacks Used Type and Percent Additives					
Protect Casing Plug Back TD									
Plug Off Zone	-								
Shots Per Foot		ON RECORD - Bridge F Footage of Each Interval				cture, Shot, Cem nount and Kind of	ent Squeeze Recor Material Used)	d d	Depth
									
TUBING RECORD:	Size:	Set At:	Packer At	t:	Liner Run:	Yes []	No		
Date of First, Resumed P	roduction, SWD or EN	NHR. Producing N		g 🗌	Gas Lift 🔲 O	ther (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Wate	er Bi	ols.	Gas-Oil Ratio		Gravity
DISPOSITION	_	Open Hole	METHOD OF Perf. [_		nmingled	PRODUCTIO	INTERV	AL:
Vented Sold	Used on Lease	Other (Specific)		(Submit A		nit ACO-4)			



LOCATION OHOME, 37329

LOCATION OHOME, KS

FOREMAN Case Kennedy

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

FIELD TICKET & TREATMENT REPORT

620-431-9210 (or 800-467-8676	j 		CEMEN	i I.			
DATE	CUSTOMER#	WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY
6/28/12	5321	McCall	# 2Ax		Sw 36	24	20	AL
CUSTOMER .	1.00.00					理以新聞如他		
)ack	McFadde	h		_	TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRI	ESS				481	Casken	CE	
POB	sk 394				letele	Gar Moo	6N	
CITY		STATE	ZIP CODE	1	228	RyaSm	R3	
lola		KS_	Ce6749			1 /		
JOB TYPE 10	mstring	HOLE SIZE_	1/8/1	HOLE DEPT	H_860'	CASING SIZE & V	VEIGHT 27/8	" ELE
CASING DEPTH	1851	DRILL PIPE		_TUBING	<u></u>		OTHER	
SLURRY WEIGH	4T	SLURRY VOL_		WATER galis	sk	CEMENT LEFT in	CASING 2-2	Enther plugs
DISPLACEMEN	14.95 bus	DISPLACEMEN		MIX PSI		RATE 4.6 b		
REMARKS: 6	eld Scholu a	neeting e	stoblished	circulat	معالمير مما	of + prupes	1 200 # P	remion Ga
followed !	by 10 Mds	freshirst	er. Mixe	ed + pu	uped 114	sks 60/40	Pogenie	coment w/
49 .00	199 61	1 + 1#	herosed	per sk	convert to	surface, t	lished po	up clear.
pushoen 2	2/2" rub	ber plus	to asing	<u>'76 w/</u>	4.95 666	troph wate	pressur	ed to 830
PSI rele	ased pressur	e Sul D	r casing			····	<u> </u>	
							-	
						ノンサ		

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401		PUMP CHARGE		1030.00
5406	SO mi	MILEAGE		200.00
5402	851.	ton milegge		
AFOPE	<i>2</i> 62. 2	ton milegge		357.35
1131	114 sles	60/40 Posmix cement		1430.70
1118B	592 #	Premoun Gel		124.32
1102	196 #	Cacl		145.04
11074	114 #	Phenoseal		147.06 Ste.00
4402	2	21/2" rudger plug		56.00
			4	
			> Contract	36
		7,55%	SALES TAX	143.69
Ravin 3737	Like Mysten	250936	ESTIMATED TOTAL DATE	3628.16

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