



KANSAS CORPORATION COMMISSION 1103776
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 # 34028
Name: Triple T Oil, LLC
Address 1: PO Box 339
Address 2: _____
City: LOUISBURG State: KS Zip: 66053 + 0339
Contact Person: Lance Town
Phone: (913) 837-8400
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: NA
Purchaser: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 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 #: _____
11/16/2012 11/20/2012 11/21/2012
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-059-26243-00-00
Spot Description: _____
SE SE SW SE Sec. 32 Twp. 15 S. R. 21 East West
165 Feet from North / South Line of Section
1485 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Franklin
Lease Name: South Beckmeyer Well #: 54
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 1008 Kelly Bushing: 0
Total Depth: 800 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: 1500 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 Gantso Date: 12/05/2012



1103776

Operator Name: Triple T Oil, LLC Lease Name: South Beckmeyer Well #: 54
 Sec. 32 Twp. 15 S. R. 21 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: GammaRay/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum GammaRay
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CASING RECORD <input checked="" type="checkbox"/> New <input 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	9	7	10	20	Portland	3	50/50 POZ
Completion	5.6250	2.8750	8	768	Portland	115	50/50 POZ

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
3	712-726	2" DML RTG	14

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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Franklin County, KS
 Well: S. Beckmeyer 54
 Lease Owner: Triple T

Town Oilfield Service, Inc.
 (913) 837-8400

Commenced Spudding:
 11/16/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
0-32	Soil-Clay	32
5	Lime	37
2	Shale	39
15	Lime	54
7	Shale	61
10	Lime	71
4	Shale	75
1	Lime	76
2	Shale	78
17	Lime	95
45	Shale	140
20	Lime	160
75	Shale	235
22	Lime	257
25	Shale	282
8	Lime	290
20	Shale	310
2	Lime	312
19	Shale	331
1	Lime	332
16	Shale	348
7	Lime	355
2	Shale	357
13	Lime	370
9	Shale	379
23	Lime	402
4	Shale	406
5	Lime	411
3	Shale	414
5	Lime	419
121	Shale	540
2	Sandy Shale	542
5	Sand	547
48	Sandy Shale	595
7	Lime	602
13	Shale	615
1	Lime	616
7	Shale	623
6	Lime	629
15	Shale	644

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals $D^2 \times .14 \times h$
 D equals diameter in feet.
 h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

- * D - Diameter of Pump Sheave
- * d - Diameter of Engine Sheave
- SPM - Strokes per minute
- RPM - Engine Speed
- R - Gear Box Ratio
- *C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

$$BELT LENGTH = 2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$$

* Need these to figure belt length

$$TO FIGURE AMPS: \frac{WATTS}{VOLTS} = AMPS$$

746 WATTS equal 1 HP

Log Book

Well No. 54

Farm South Beckmeyer

KS Franklin
 (State) (County)

32 15 21
 (Section) (Township) (Range)

For Triple T oil
 (Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East
 Louisburg, KS 66053
 913-710-5400

Thickness of Strata	Formation	Total Depth	Remarks
0-32	soil-clay	32	
5	Lime	37	
2	shale	39	
15	Lime	54	
7	shale	61	
10	Lime	71	
4	shale	75	
1	Lime	76	
2	shale	78	
17	Lime-shells	95	
45	shale	140	
20	Lime	160	
75	shale	235	
22	Lime	257	
25	shale	282	
8	Lime	290	
20	shale	310	
2	Lime	312	
19	shale	331	
1	Lime	332	
16	shale	348	
7	Lime	355	
2	shale	357	
13	Lime	370	
9	shale	379	
23	Lime	402	
4	shale	406	

406

Thickness of Strata	Formation	Total Depth	Remarks
5	Lime	411	
3	shale	414	
5	Lime	419	
121	shale	540	Hertha
2	sandy shale	542	no oil
5	sand	547	slight show - wayside
48	sandy shale	595	
7	Lime	602	
13	shale	615	
1	Lime	616	
7	shale	623	
6	Lime	629	
15	shale	644	
4	Lime	648	
18	shale	666	
1	Lime	667	
21	shale	688	
2	Lime	690	
15	shale	705	
2	sand & shale	707	
4	sandy shale	711	
1	sand & shale	712	50% Oil
14	core	726	
74	shale	800	TD



CONSOLIDATED
Well Services, LLC

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

TICKET NUMBER 35243

LOCATION Okta works

FOREMAN Fred Maden

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/10/12	7966	So Beckmeyer #54	SW 32	16	21	FR
CUSTOMER Triple T			TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRESS 105 E. Amity			506	FrcMad	Safety	ML
CITY Louisburg	STATE KS	ZIP CODE 66053	495	Hor Bec	H-B	
			510	Settuc		
			548	Mik Haa	MTI	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 800 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 768' DRILL PIPE Baffle in TUBING @ 75' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 17' + 2 1/2" Ply
 DISPLACEMENT 4.37 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 50 BPM

REMARKS: Establish pump rate. Mix Pump 100# Gel Flush. Mix Pump
115 SKS 50/50 for Mix Cement 270 Gal. Cement to surface.
Flush pump & lines clean. Displace 2 1/2" Rubber plug to Baffle
in casing. Pressure to 800# PSI. Release pressure to set
float O Valve. Shut in casing.

Customer Supplied H₂O
Tos Drilling - Wesley

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	20 mi	MILEAGE	495	9900
5402	768'	Casing Footage		N/C
5407	1/2 Minimum	Ten Miles	548	175 ⁰⁰
1124	115 SKS	50/50 for Mix Cement		1259 ²⁰
1115B	293#	Premium Gel		161 ⁵³
4402	1	2 1/2" Rubber plug		29 ⁰⁰
SCANNED				
			7.5%	SALES TAX
				ESTIMATED
				TOTAL
				105 ⁰⁰
				2738 ⁹⁸

3737

HORIZION Wesley Dillard

TITLE _____

DATE _____

knowledge 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