



KANSAS CORPORATION COMMISSION 1103428
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 #: _____

<u>11/14/2012</u>	<u>11/15/2012</u>	<u>11/15/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-26247-00-00

Spot Description: _____
SE NE SW SE Sec. 32 Twp. 15 S. R. 21 East West

825 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 #: 58

Field Name: Paola-Rantoul

Producing Formation: Squirrel

Elevation: Ground: 1017 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: 0
feet depth to: 20 w/ 3 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 Gamboa Date: 12/05/2012



1103428

Operator Name: Triple T Oil, LLC Lease Name: South Beckmeyer Well #: 58
 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 type="checkbox"/> Yes <input checked="" 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	765	Portland	109	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 <i>(Amount and Kind of Material Used)</i>	Depth
4	716-723	2" DML RTG	7

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Franklin County, KS
Well: S. Beckmeyer 58
Lease Owner: Triple T

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

Commenced Spudding:
11/14/2012

15-059 - 212/11-00-10

WELL LOG

Thickness of Strata	Formation	Total Depth
0-42	Soil-Clay	42
5	Lime	47
4	Shale	51
16	Lime	67
7	Shale	74
10	Lime	84
6	Shale	90
18	Lime	108
43	Shale	151
22	Lime	173
73	Shale	246
22	Lime	268
24	Shale	292
8	Lime	300
21	Shale	321
1	Lime	322
21	Shale	343
1	Lime	344
12	Shale	356
8	Lime	364
3	Shale	367
12	Lime	379
9	Shale	388
23	Lime	411
4	Shale	415
4	Lime	419
4	Shale	423
5	Lime	428
118	Shale	546
1	Sandy Shale	547
7	Sand	554
50	Sandy Shale	604
7	Lime	611
5	Shale	616
3	Lime	619
34	Shale	653
3	Lime	656
17	Shale	673
1	Lime	674
30	Shale	704

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. 58

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

South Beckmeyer Farm, Franklin County

KS State: Well No. 58

Elevation ~~1016~~ 1017

Commenced Spuding Nov 14 20 12

Finished Drilling Nov 15 20 12

Driller's Name Wesley Dollard

Driller's Name _____

Driller's Name _____

Tool Dresser's Name _____

Tool Dresser's Name Ryan Ward

Tool Dresser's Name Steven Scott

Contractor's Name TOS
32 15 21

(Section) S (Township) _____ (Range) 325 ft.

Distance from E line, 1435 ft.

3 sacks

7 hrs

CASING AND TUBING RECORD

- 10" Set _____ 10" Pulled _____
- 8" Set _____ 8" Pulled _____
- 7 ~~8~~" Set 20 6 1/2" Pulled _____
- 4" Set _____ 4" Pulled _____
- 2" Set _____ 2" Pulled _____

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
753	2	Batt	e		
765	2	Float			
				2	7/16

Thickness of Strata	Formation	Total Depth	Remarks
0-42	so. l - clay	42	
5	Lime	47	
4	shale	51	
16	Lime	67	
7	Shale	74	
10	Lime	84	
6	shale	90	
18	Lime - shells	108	
43	Shale	151	
22	Lime	173	
73	shale	246	
22	Lime	268	
24	shale	292	
8	Lime	300	
21	shale	321	
1	Lime	322	
21	shale	343	
1	Lime	344	
12	shale	356	
8	Lime	364	
3	shale	367	
12	Lime	379	
9	shale	388	
23	Lime	411	
4	shale	415	
4	Lime	419	
4	shale	423	

423

Thickness of Strata	Formation	Total Depth	Remarks
5	Lime	428	Heath
118	shale	546	
1	sandy shale & lime	547	
7	sand	554	odor - slight skew - wagside
50	sandy shale	604	
7	Lime	611	
5	shale	616	
3	Lime	619	
34	shale	653	
3	Lime	656	
17	shale	673	
1	Lime	674	
30	shale	704	
3	sand	707	broken - 75% solid oil
4	sand	710	
8	sand	724	broken - 50% oil / sand no oil - TD
76	sandy shale	800	



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 35218

LOCATION Ottawa

FOREMAN Alan Mader

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-15-12	7966	Sberk-meyer 58	SE 32	15	21	JK

CUSTOMER	TRUCK#	DRIVER	TRUCK#	DRIVER
Triple Y	376	Alan Mader	Safety	Meat
	368	Art Mader	AKM	
	558	Brett Mader	BM	

MAILING ADDRESS	CITY	STATE	ZIP CODE
105 E. Amity	Louisburg	KS	66053

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 800 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 765 DRILL PIPE _____ TUBING _____ OTHER 733 baffle
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING yes
 DISPLACEMENT 414 DISPLACEMENT PSI 800 MIX PSI 200 RATE 46 gpm

REMARKS: Held meeting. Established rate. Mixed & pumped 100# gel followed by 109 sk 50/50 cement plus 2 1/2 gel. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PSI. Set float. Closed valve.

105, Wes
105 water

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030.00
5406	80	MILEAGE	368	80100
5402	765	casing footage	368	
5407	1/2 min	ton miles	558	175100
1124	109	50/50 cement		119355
1118B	283#	gel		59.43
4402	1	2 1/2 plug		28.00
			SALES TAX	99.92
			ESTIMATED TOTAL	2665.90

Rev'n 9797
AUTHORIZATION Wesley Dillard 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.

254620