



KANSAS CORPORATION COMMISSION 1105652
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 # 34684
Name: German, Ronald dba German Oil Company
Address 1: 1500 MAIN
Address 2: _____
City: NEOSHO FALLS State: KS Zip: 66758 + _____
Contact Person: RONALD GERMAN
Phone: (620) 963-2735
CONTRACTOR: License # 33900
Name: Leis, Steven A.
Wellsite Geologist: NONE
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>10/17/2012</u>	<u>10/19/2012</u>	<u>10/31/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-207-28363-00-00
Spot Description: _____
SE NE NW NE Sec. 4 Twp. 24 S. R. 17 East West
4675 Feet from North / South Line of Section
1615 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Woodson
Lease Name: KRAMER Well #: 3
Field Name: _____
Producing Formation: MISSISSIPPI
Elevation: Ground: 967 Kelly Bushing: 978
Total Depth: 1240 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: 0 ppm Fluid volume: 40 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: RON-BOB OIL LLC
Lease Name: NELSON License #: 34047
Quarter NE Sec. 3 Twp. 24 S. R. 17 East West
County: WOODSON Permit #: D28898

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: 12/28/2012

1105652

Operator Name: German, Ronald dba German Oil Company Lease Name: KRAMER Well #: 3
 Sec. 4 Twp. 24 S. R. 17 East West County: Woodson

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 <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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name <u>MISSISSIPPI</u> Top Datum
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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	10	7	17	20	PORTLAND	10	

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

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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Hurricane Services, Inc.
 3613 A Y Road
 Madison, KS 66860
 Office # 620-437-2661
 Brad Cell # 620-437-6765

Ticket Number 100169
 Location Madison
 Foreman Brad Butler

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
10-30-12		Kramer #3	4-24-17E	Woodson
Customer		Mailing Address	City	State Zip
German Oil Company				

Job Type:	Plug To Abandon	Truck #	Driver
Hole Size:	5 7/8"	201	Kelly -
Hole Depth:	1240'	202	Austin -
Bridge Plug:		106	David -
Packer:	PBTD:		

Quantity Or Units	Description of Services or Product	Pump charge	
0	Mileage 10k relocation	\$3.25/Mile	790.00 N/C
72 sacks	60/40 Replacement	10.90	784.80
124 lbs	Gel 22	.30	37.20
4 Hrs	water truck	84.00	336.00
	Rental on 1" sand screens		50.00
Tons	Bulk Truck Minimum charge	\$1.15/Mile	250.00
	Plugs		
		Subtotal	2248.00
		Sales Tax	10.00
		Estimated Total	2308.00

Remarks: Rig up to 1" Pipe - washed 1" down to 1200', set cement plugs as follows:
 10 sacks at 1200'
 10 sacks at 850'
 52 sacks at 260' to Surface

NOTE: Gel Spacers between plugs
 (Gel provided by customer)

Called by Ben
 Customer Signature

(Rev. 1-2011)

Lease Name: Kramer	Spud Date: 10-17-2012	Surface Pipe Size: 7"	Depth: 30'	TD: 1240
Operator: Ron German	Well #3	Bit Diameter: 5 7/8"		
Footage taken	Sample type			
0_6	soil			
6_17	clay			
17_28	sand and gravel			
28_75	lime			
75_146	shale			
146_165	lime			
165_194	shale			
194_268	lime			
268_320	shale			
320_327	lime			
327_335	shale			
335_405	lime			
405_410	shale			
410_454	lime			
454_458	shale			
458_462	lime			
462_595	big shale			
595_598	lime			
598_625	shale			
625_630	lime			
630_650	shale			
650_660	lime			
660_671	shale			
671_677	lime			
677_726	shale			
726_728	lime			
728_732	shale			
732_742	lime			
742_753	shale			
753_757	lime			
757_776	shale			
776_780	lime			
780_796	shale			
796_809	lime			
809_830	shale			
830_831	1st cap			
831_834	shale			
834_835	2nd cap			
835_840	broken sand			
840_1182	shale			
1182_1193	hard lime			
1193_1203	soft lime			
1203_1204	hard lime			
1204_1208	soft lime			
1208_1210	hard lime			
1210_1212	soft lime			
1212_1214	hard lime			
1214_1240	lime			
	1240 TD			