



KANSAS CORPORATION COMMISSION 1104840
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 # 34585
Name: Oil Sources Corp.
Address 1: 12508 CATALINA ST.
Address 2:
City: LEAWOOD State: KS Zip: 66209 + 2267
Contact Person: kevin kleweno
Phone: (913) 481-4604
CONTRACTOR: License # 32834
Name: JTC Oil, Inc.

Wellsite Geologist: kevin kleweno
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 #:
12/7/2012 12/8/2012 12/12/2012
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-059-26294-00-00
Spot Description:
SE NE SE SW Sec. 17 Twp. 16 S. R. 21 East West
700 Feet from North / South Line of Section
2921 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Franklin
Lease Name: crown Well #: 23
Field Name:
Producing Formation: squirell
Elevation: Ground: 970 Kelly Bushing: 0
Total Depth: 710 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 Garrison Date: 12/21/2012

1104840

Operator Name: Oil Sources Corp.

Lease Name: CROWN

Well #: 23

Sec. 17 Twp. 16 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 Yes No (Attach Additional Sheets)

Log Formation (Top), Depth and Datum Sample

Samples Sent to Geological Survey Yes No

Name Top Datum
gamma 646-658 2"dml rtg

Cores Taken Yes No

Electric Log Run Yes No

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

List All E. Logs Run:

CASING RECORD New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Table with 8 columns: 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. Rows include surface and completion data.

ADDITIONAL CEMENTING / SQUEEZE RECORD

Table with 4 columns: Purpose, Depth Top Bottom, Type of Cement, # Sacks Used, Type and Percent Additives. Includes options like Perforate, Protect Casing, Plug Back TD, Plug Off Zone.

PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated. Includes columns for Shots Per Foot, Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used), and Depth.

TUBING RECORD: Size: Set At: Packer At: Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. Producing Method: Flowing Pumping Gas Lift Other (Explain). Estimated Production Per 24 Hours: Oil Bbls., Gas Mcf, Water Bbls., Gas-Oil Ratio, Gravity.

DISPOSITION OF GAS: Vented Sold Used on Lease (If vented, Submit ACO-18.) METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled (Submit ACO-5) Other (Specify) PRODUCTION INTERVAL:

