

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

101355

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 #	32701		API No. 15 - 15-015-23961-00-00
Name: C & G Drilling			Spot Description:
Address 1: 701 E. River	St.		NW_SE_NW_NE_Sec. 16 Twp. 26 S. R. 8 F East West
Address 2:			970 Feet from ▼ North / □ South Line of Section
City: EUREKA	State: KS Z	rip: 67045 + 2100	Feet from ▼ East /
Contact Person:Tim Gul	ck		Footages Calculated from Nearest Outside Section Corner:
Phone: ( 620 ) 583-4	1306		☑NE □NW □SE □SW
CONTRACTOR: License #	32701		County: Butler
Name: C & G Drilling, In			Lease Name:Well #:
Wellsite Geologist: Bill Sto	ut		Field Name: Blankenship
Purchaser:			Producing Formation: Bartlesville
Designate Type of Complet	on:		Elevation: Ground: 1373 Kelly Bushing: 1379
✓ New Well	Re-Entry	Workover	Total Depth: 2548 Plug Back Total Depth: 2548
✓ wsv	v □swd	— □ siow	Amount of Surface Pipe Set and Cemented at: 200 Fee
☐ Gas ☐ D&A		☐ sigw	Multiple Stage Cementing Collar Used? ☐ Yes ✓ No
☐ og	☐ GSW	Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Methar	те)	_ ,	If Alternate II completion, cement circulated from:
Cathodic Othe	er (Core, Expl., etc.):		feet depth to:
If Workover/Re-entry: Old \	Vell Info as follows:		W/ SX CITE
Operator:			
Well Name:			Orilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:	Original 1	Total Depth:	Chloride content: 400 ppm Fluid volume: 35 bbls
Deepening F	Re-perf. 🔲 Conv. t	o ENHR 🔲 Conv. to SWD	
	Conv. t	o GSW	Dewatering method used: Hauled to Disposal
Plug Back:	Pii	ug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled	Permit #:		Operator Name:C & G Drilling, Inc
Dual Completion	Permit #:		Lease Name: Welsh License #; 32701
SWD	Permit #:		
ENHR	Permit #:		Quarter NW Sec. 13 Twp. 25 S. R. 8 V East West
☐ GSW	Permit #:		County: GW Permit #: E11737
10/17/2012 1	0/20/2012	11/01/2012	
Spud Date or Date	ite Reached TD	Completion Date or 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** 

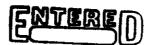
KCC Office Use ONLY
Letter of Confidentiality Received
Date:
Confidential Release Date:
☑ Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Deanna Gerrison Date: 12/26/2012

Side Two

1101355

Operator Name: C 8	G Drilling, Inc.		Lease Name	: LARCOM		_ Well #:1_	
Sec. 16 Twp.26	s. R. <u>8</u>	✓ East  West	County: Bu	utler			
time tool open and clo	osed, flowing and sho es if gas to surface to	nd base of formations pen ut-in pressures, whether s est, along with final chart( I well site report.	hut-in pressure	reached static level	, hydrostatic pres	sures, bottom	hole temperature, flui
Drill Stem Tests Taker		☐ Yes   ✓ No	[	✓ Log Formatio	on (Top), Depth a	nd Datum	Sample
Cores Taken Yes V NElectric Log Run Yes N		✓ Yes	1 '	lame rtlesville		Тор 2409	Datum -1030
		✓ Yes			2403 -1030		
List All E. Logs Run:							
Gamma Neutron							
		CASING	RECORD 7	New Used			<del>.</del>
		Report all strings set-	1		1		
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	12.25	8.625	24	211	Class A	110	3% CC
Prod	7.875	5.5	14	2548	Thickset	110	5# Kol
		ADDITIONAL	CEMENTING /	SQUEEZE RECORD			
Purpose:  —— Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	d Type and Percent Additives			s
Protect Casing Plug Back TD Plug Off Zone	-					-	
Plug Off Zone							
Shots Per Foot		ION RECORD - Bridge Plug Footage of Each Interval Per			acture, Shot, Cemer mount and Kind of M		rd Depth
2	2402-2407			800 gal acid	I 15% HCL		2402
2	2409-2414			800 gal acid	I 15% HCL		2402
2	2416-2419			800 gal acid 15% HCL 2:			2402
1	2430-2451			800 gal acid	15% HCL		2451
TUBING RECORD:	Size: 2.375	Set At: 2400	Packer At:	Liner Run:	Yes ✓ No	<b>)</b>	
Date of First, Resumed 01/10/2013	Production, SWD or Ef	NHR. Producing Meth	nod: ✓ Pumping	Gas Lift (	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbis. Gas	Mcf	Water E	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:		METHOD OF COM	API ETION:		PRODUCTI	ON INTERVAL:
Vented Sold			Perf. D	ually Comp. 🔲 Co	mmingled		OH HAILINAL.
	bmit ACO-18.)		(Sub		omit AČO-4)		·





35624 **TICKET NUMBER** LOCATION EIKERA FOREMAN RICK Ledford

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

### **FIELD TICKET & TREATMENT REPORT**

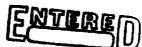
CEMENT API+ 15-015-23961 CUSTOMER# WELL NAME & NUMBER SECTION TOWNSHIP RANGE COUNTY 10 /20 /12 CUSTOMER 2600 #/ 16 265 96 Butler C+ G MAILING ADDRESS 444 Orilling TRUCK # DRIVER TRUCK # DRIVER ו צוא 520 Alla B 611 Ches M CITY ZIP CODE #s 47045 JOB TYPE L/S HOLE SIZE フッター 2547 HOLE DEPTH CASING SIZE & WEIGHT 5%" LL 14" CASING DEPTH 2578' KB. **DRILL PIPE** TUBING OTHER SLURRY WEIGHT /3 4# SLURRY VOL 35 63/ WATER gal/sk 9.6 CEMENT LEFT IN CASING o ' DISPLACEMENT 60 DISPLACEMENT PSI\_/400 RATE ml catation Casing <u>aerflush</u> Ket-son /sx + 1# shoneson bu @ 136 " /gal. Bb1 fresh Final pure pressure loss

Phroned withole w 20 40 Cent. \$ 1359 15 Throng You"

omet " /b				
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401		PUMP CHARGE	1030.00	1430.00
5466		MILEAGE	4.00	100.00
1126-8	110 343	thickset comet	19.20	2112.44
IUA	5504	5th Kal-seal /sx	.46	253.00
UDA	110#	Phenescal/SH	1.29	141.70
IIIA	146 <sup>M</sup>	metasilicate pa-flush	2.00	200.00
5467	6. <sup>65</sup>	to mileage but the	m/c	350.00
9164		Sh" censt based	227.01	229.40
4/3/		515" x 7219" centralizes	48.00	240.00
4159		51/2" AFU flood shee	344.00	344.10
4454		51/2" latch dan ala	254.W	254.00
5611		lental on Ste" Before bear	101.00	100.00
	06206	(0% Discount )	settel	53/3.70
vin 3737	<u> </u>	58 ( <819. Oe) /(57)	SALES TAX	841.19
UTHORIZTION	Cathon	2883.03	ESTIMATED TOTAL	5561.09
AUTHORIZIUN		TITLE 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.

# CONSOLIDATED ON WORLD SURVIVOR, LLC



TICKET NUMBER 35572

LOCATION Euroka KS

FOREMAN Shannon Feck

Box 884, Chanute, KS 66720

FIELD TICKET & TREATMENT REPORT

<b>20-4</b> 31-9210	or 800-467-8676	CEMEN	NT APT #	15-015-	23961	
DATE	CUSTOMER # V	VELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-17-12	2600 Larco	m #/	16	265	8 <i>E</i>	Butler
USTOMER	-	C+6				
AILING ADDRI		-	TRUCK#	DRIVER	TRUCK#	DRIVER
MICHIG ADDIN		Drlg	445	Dave 6		<u> </u>
TY	701 E River	ZIP CODE	479	Joey K		
Eurek		67045				
OB TYPE SIP					-5-7	<u> </u>
				Casing Size & W		
ASING DEPTH					OTHER	
LURRY WEIGH HSPLACEMEN	7/ - 1 1	DL 27 86/ WATER gail	sk <u>0 - /</u>	CEMENT LEFT In		· · · · · · · · · · · · · · · · · · ·
HISPLACEMEN	T <u>/Z+' OD/</u> DISPLACEN	MENT PSI /00 MIX PSI /0		RATE 5 8911		-11
	ifety Meeting, Ri		lasing, Bra			
	mixed 110 st		vent with	3% cal		
	cele/SK @ 14.5-			3b/ wate		
casing	in Good circula	tion @ all tim	105/5 Bb	1 Slurry	to pit.	<u> </u>
		- 1				
		Thanks St	vannon 4	Crew"		
				<u> </u>		
ACCOUNT		-			UNIT PRICE	<del></del>
CODE	QUANITY or UNITS	DESCRIPTION of	CRIPTION of SERVICES or PRODUCT			TOTAL
54015	1	PUMP CHARGE			825.00	825.00
5406	15	MILEAGE			4.00	60.00
11045	110 SKS	Class A cem	eul		14.95	1644.50
1102	3/0#	Calcium @ 34			. 74	229.40
1118 B	210#	6e/@ 2%			. 21	44.10
1107	28 ₺	Florele @ 14 %	sx		2.35	65.80
	487	7,7,00 G 77.7.	<del></del>		*	50.
5407	5. 17	Ton mileage	bulk True		m/c	350.00
<del>- /0  </del>	<u>J.</u>	Ton mileage	UUIK INU	<b>T</b>	NIC	330.00
						<b></b>
*··						<del>                                     </del>
		FO-	C 000001			<del> </del>
		- 1 / (UMO)	Diecosot	· \	l	l

AUTHORIZTION COLUMN

Ravin 3737

9034010

ESTIMATED TOTAL

SALES TAX

3348.<sup>75</sup>

TITLE\_

DATE\_\_

6.55 %

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.