



KANSAS CORPORATION COMMISSION 1101355  
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 # 32701  
Name: C & G Drilling, Inc.  
Address 1: 701 E. River St.  
Address 2: \_\_\_\_\_  
City: EUREKA State: KS Zip: 67045 + 2100  
Contact Person: Tim Gulick  
Phone: ( 620 ) 583-4306  
CONTRACTOR: License # 32701  
Name: C & G Drilling, Inc.  
Wellsite Geologist: Bill Stout  
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 #: \_\_\_\_\_

<u>10/17/2012</u>	<u>10/20/2012</u>	<u>11/01/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-015-23961-00-00  
Spot Description: \_\_\_\_\_  
NW SE NW NE Sec. 16 Twp. 26 S. R. 8  East  West  
970 Feet from  North /  South Line of Section  
1840 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Butler  
Lease Name: LARCOM Well #: 1  
Field Name: Blankenship  
Producing Formation: Bartlesville  
Elevation: Ground: 1373 Kelly Bushing: 1379  
Total Depth: 2548 Plug Back Total Depth: 2548  
Amount of Surface Pipe Set and Cemented at: 200 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 cnt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 400 ppm Fluid volume: 35 bbls  
Dewatering method used: Hauled to Disposal  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: C & G Drilling, Inc  
Lease Name: Welsh License #: 32701  
Quarter NW Sec. 13 Twp. 25 S. R. 8  East  West  
County: GW Permit #: E11737

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: 12/26/2012

1101355

Operator Name: C & G Drilling, Inc. Lease Name: LARCOM Well #: 1  
 Sec. 16 Twp. 26 S. R. 8  East  West County: Butler

**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)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No

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

List All E. Logs Run:

Gamma  
Neutron

Log Formation (Top), Depth and Datum  Sample

Name Top Datum  
 Bartlesville 2409 -1030

CASING RECORD  New  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	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:	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
2	2402-2407	800 gal acid 15% HCL	2402
2	2409-2414	800 gal acid 15% HCL	2402
2	2416-2419	800 gal acid 15% HCL	2402
1	2430-2451	800 gal acid 15% HCL	2451

TUBING RECORD:	Size: 2.375	Set At: 2400	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. 01/10/2013	Producing Method: <input type="checkbox"/> Flowing <input checked="" 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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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**ENTERED**

TICKET NUMBER 35572  
LOCATION Eureka KS  
FOREMAN Shannon Feck

Box 884, Chanute, KS 66720  
20-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**

**CEMENT** API # 15-D15-23961

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-17-12	2600	Larcum #1	16	26S	8E	Butler
CUSTOMER <u>C+6 Drilling</u>			C+6 Drly			
MAILING ADDRESS <u>701 E River St</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY <u>Eureka</u>			<u>445</u>	<u>Dave G</u>		
STATE <u>KS</u>			<u>479</u>	<u>Joey K</u>		
ZIP CODE <u>67045</u>						

JOB TYPE SP 0 HOLE SIZE 12 1/4" HOLE DEPTH 217' CASING SIZE & WEIGHT 8 3/8"  
 CASING DEPTH 211 K.B DRILL PIPE --- TUBING --- OTHER ---  
 SLURRY WEIGHT 14.5-15# SLURRY VOL 27 Bbl WATER gal/sk 6.4 CEMENT LEFT in CASING 15'  
 DISPLACEMENT 12.4 Bbl DISPLACEMENT PSI 100 MIX PSI 100 RATE 5 BPM

REMARKS: Safety Meeting, Rig up to 8 3/8 Casing, Break circulation w/5 Bbl water, mixed 110 sks Class "A" cement with 3% calcium, 2% gel, & 1/4# Floccle/sk @ 14.5-15#/gals. Displace w/12.4 Bbl water & shut casing in. Good circulation @ all times/ 5 Bbl slurry to pit.

"Thanks Shannon & Crew"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	15	MILEAGE	4.00	60.00
11045	110 SKS	Class "A" cement	14.95	1644.50
1102	310 #	Calcium @ 3%	.74	229.40
1118 B	210 #	Gel @ 2%	.21	44.10
1107	28 #	Floccle @ 1/4#/sk	2.35	65.80
5407	5.17	Ton mileage bulk Truck	m/c	350.00
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; width: fit-content; margin: 0 auto;">                     5% Discount                      &lt;167.417&gt;                      \$3181.30                 </div>				
			Sub Total	3218.80
			SALES TAX <u>6.55%</u>	129.94
			ESTIMATED TOTAL	3348.74

Rev'n 3737

853906

AUTHORIZATION Cotton 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.