



KANSAS CORPORATION COMMISSION 1101415  
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 Jackson  
Purchaser: Maclaskey

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>06/15/2012</u>	<u>06/19/2012</u>	<u>06/29/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-073-24176-00-00

Spot Description: \_\_\_\_\_

NE NW SW NW Sec. 3 Twp. 25 S. R. 9  East  West

1450 Feet from  North /  South Line of Section

350 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County: Greenwood

Lease Name: BOOTH Well #: 13

Field Name: Polhamus

Producing Formation: Bartlesville

Elevation: Ground: 1300 Kelly Bushing: 1306

Total Depth: 2446 Plug Back Total Depth: 2421

Amount of Surface Pipe Set and Cemented at: 40 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: 400 ppm Fluid volume: 30 bbls

Dewatering method used: Haul Off Pit

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



1101415

Operator Name: C & G Drilling, Inc. Lease Name: BOOTH Well #: 13  
 Sec. 3 Twp. 25 S. R. 9  East  West County: Greenwood

**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:  Gamma Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Bartlesville</td> <td>2297</td> <td>-992</td> </tr> </table>	Name	Top	Datum	Bartlesville	2297	-992
Name	Top	Datum					
Bartlesville	2297	-992					

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	12.25	8.625	24	40	Class A	40	3% CC
Prod	7.875	5.5	15	2421	60/40 Pos Mix Thickset	285	8% Gel 5# Floseal

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
1	2305-2315	1000 Gal 15% HCL	2309
1	2320-2330		2320

TUBING RECORD: Size: <u>2.375</u> Set At: <u>2300</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or ENHR. <u>10/10/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
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 checked="" 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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 07120  
LOCATION Eureka  
FOREMAN Steve Mead

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-13-12	2600	Booth #13	3	25S	9E	Greenwood
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
C+G Drilling Inc			485	Alan M		
MAILING ADDRESS			611	ODM		
701 E River St						
CITY	STATE	ZIP CODE				
Eureka	KS	67045				

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 40 CASING SIZE & WEIGHT 8 3/4  
 CASING DEPTH 40' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 5'  
 DISPLACEMENT 2 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 8 3/4 casing. Break circulation w/ Fresh water. Mix 40sk Class A Cement w/ 3% CaCl2 + 2% Gel. Displace with 2 bbls Fresh water. Shut well in. Good cement returns to surface. Job complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5465	1	PUMP CHARGE	825.00	825.00
5466	10	MILEAGE	4.00	40.00
11645	40sk	Class A Cement	14.95	598.00
1102	110"	CaCl2 3%	.74	81.40
1118B	25"	Gel 2%	.21	15.75
5407		Tenmileage Bulk Truck	750	350.00
<div style="border: 2px solid black; border-radius: 50%; padding: 10px; display: inline-block;">           5% Discount            298.047            \$1862.85         </div>				
			SubTotal	1970.25
			SALES TAX	59.24
			ESTIMATED TOTAL	1960.89

Rev'n 3737

260506

AUTHORIZATION [Signature] 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:

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT** API # 15-073-24176

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-14-12	2600	Booth # 13	3	253	9E	GW
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
C+G Drilling			520	John		
701 E. River			515	Colin		
CITY			637	Jacy		
STATE				Chris M		
ZIP CODE						
Evieva						
KS						
67045						

JOB TYPE L/S 0 HOLE SIZE 7 7/8" HOLE DEPTH 2426' CASING SIZE & WEIGHT 5 1/2"  
 CASING DEPTH 2421 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.0 - 13.5 SLURRY VOL 90 Bbl WATER gal/sk 9.0 - 9.0 CEMENT LEFT in CASING 0'  
 DISPLACEMENT 58 Bbl DISPLACEMENT PSI 1000 MMR PSI 1500 Bump/leg RATE \_\_\_\_\_

REMARKS: Safety meeting - Rig up to 5 1/2" casing w/ rotating head. Pumped 10 Bbl water ahead  
Mixed 200 sacks 60/40 Pozmix cement w/ 8% gel + 44" flocc/sk @ 13.0 gal Tail in w/ 95  
sks thickest cement w/ 5" Kel-seal/sk @ 13.5 gal. washout pump + lines, release latch down  
obs. Ortolow w/ 58 Bbl fresh water. Final pump pressure 1000 PSI. Drop plug to 1500 PSI  
release pressure, flood + plug held. Good cement returns to surface = 1 Bbl slurry to pit.  
Job complete. Rig down.

Date: Pumped 60thals cement on 1, 3, 5, 2, 9 based on #10

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	15	MILEAGE	4.00	60.00
1151	200 sacks	60/40 Pozmix cement	12.55	2510.00
1119B	1325 gal	8% gel	.21	288.75
1107	43"	44" flocc/sk	2.35	101.05
1126A	95 sacks	thickest cement	19.20	1824.00
1118A	425"	5" Kel-seal/sk	.46	195.50
5407	13.3	tax mileage bulk tr	m/c	350.00
5502E	3 hrs	80 Bbl vac. TRK	90.00	270.00
1123	3000 gals	city water	16.50/1000	49.50
4104	1	5 1/2" cement basket	229.00	229.00
4130	5	5 1/2" x 7 7/8" centralizers	48.00	240.00
4159	1	5 1/2" AEU float shoe	344.00	344.00
4454	1	5 1/2" latch down plug	254.00	254.00
4310	1	Rental on 5 1/2" rotating head	100.00	100.00
		5% < 404.890 = 1683.31	Subtotal	7653.80
			SALES TAX	433.90
			ESTIMATED TOTAL	8087.70

250600

AUTHORIZATION [Signature] 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.