



KANSAS CORPORATION COMMISSION 1105748
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 # 31847
Name: Bradley Oil Company
Address 1: PO BOX 21614
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73156 + 1614
Contact Person: Bradd Schwartz
Phone: (405) 823-8136
CONTRACTOR: License # 33734
Name: Hat Drilling LLC
Wellsite Geologist: none
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 #:

09/17/2012	09/18/2012	09/18/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-091-23895-00-00

Spot Description:
SW SW NW NE Sec. 30 Twp. 14 S. R. 22 East West
3963 Feet from North / South Line of Section
2519 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Johnson

Lease Name: Gillespie Well #: 1-15

Field Name:

Producing Formation: Bartlesville

Elevation: Ground: 1049 Kelly Bushing: 0

Total Depth: 948 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 41 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: 0 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: 01/04/2013



1105748

Operator Name: Bradley Oil Company Lease Name: Gillespie Well #: I-15
 Sec. 30 Twp. 14 S. R. 22 East West County: Johnson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: case hole log	<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>895</td> <td>905</td> </tr> </table>	Name	Top	Datum	Bartlesville	895	905
Name	Top	Datum					
Bartlesville	895	905					

CASING RECORD <input type="checkbox"/> New <input checked="" 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	7.625	7	8	41	portland	20	
production	5.625	2.875	8	948	50-50 poz	141	

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
3	894-904	spot acid on perms	

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>895-905</u>
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HAT DRILLING
12371 KS HWY 7
MOUND CITY, KS 66056
LICENSE # 33734

Gillespie I-15
API # 15-091-23895-00-00
SPUD DATE 9-17-12

Footage	Formation	Thickness	Set 41' of 7"
2	Topsoil	2	TD 948'
20	clay	18	Ran 937' of 2 7/8
58	shale	38	
65	lime	7	
73	shale	8	
107	lime	34	
114	shale	7	
123	lime	9	
130	shale	7	
150	lime	20	
168	shale	18	
191	lime	23	
197	shale	6	
208	lime	11	
228	shale	20	
256	lime	28	
270	shale	14	
279	lime	9	
297	shale	18	
302	lime	5	
310	shale	8	
326	lime	16	
361	shale	35	
385	lime	24	
396	shale	11	
435	lime	39	
605	shale	170	
609	lime	4	
626	shale	17	
630	lime	4	
690	shale	60	
692	lime	2	
794	shale	102	
796	lime	2	
885	shale	89	
895	sand	10	good odor, good bleed
948	shale	53	

RECEIVED
DEC 28 2012
KCC WICHITA

CASING MECHANICAL INTEGRITY TEST

UNIT # E-2171

Disposal Enhanced Recovery:

SWSWNE NE, Sec 30, T 14 S, R 22 04W

NW-OP
Repressuring
Flood
Tertiary

3963 Feet from South Section Line
2519 Feet from East Section Line

Date injection started _____
API #15 - 091 - 23895

Lease Gillespie Well # I-15
County Johnson

Operator: Bradley Oil Company
Name & Address PO Box 21614
Oklahoma City, OK 73156

Operator License # 31847
Contact Person Bradd Schwartz
Phone 405-340-7152
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DEC 28 2012
KCC WICHITA

Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____
Conductor Surface Production Liner Tubing
Size _____ 7 _____ 2 1/8 _____ Size _____
Set at _____ 40 _____ 937 _____ Set at _____
Cement Top _____ 0 _____ 0 _____ Type _____
Bottom _____ 40 _____ 937 _____
TD/Perf. _____ TD (and plug back) 948 ft. depth
Packer type _____ Size _____ Set at _____
Zone of Injection _____ ft. to ft. _____ Perf. or open hole _____

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F Time: Start 10 Min. 20 Min. 30 Min.
J Pressures: 800 800 800 Set up 1 System Pres. during test _____
L _____ _____ _____ Set up 2 Annular Pres. during test _____
D _____ _____ _____ Set up 3 Fluid loss during test _____ bbls.
D _____ _____ _____

A Tested: Casing or Casing - Tubing Annulus
The bottom of the tested zone is shut in with Rubber Plug

Test Date 9/18/2012 Using Consolidated Company's Equipment
The operator hereby certifies that the zone between 0 feet and 937 feet
was the zone tested Bradd Schwartz President
Signature Title

The results were Satisfactory , Marginal _____, Not Satisfactory _____
State Agent Tara C. Hemenway Title Part II Witness: Yes _____ Not _____
REMARKS: Well not perforated

Conservation Div.; KDHE/T; Dist. Office;

Computer Update
30
KCC Form U-7 6/84



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620-431-9210 - 1-800-467-8676
Fax 620-431-0012

INVOICE

Invoice # 253046

Invoice Date: 09/21/2012 Terms: 0/0/30,n/30

Page 1

BRADLEY OIL COMPANY
P O BOX 21614
OKLAHOMA CITY OK 73156-1614
(405)751-9146

GILLESPIE I-15
34923
30-14-22
09-18-2012
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	141.00	10.9500	1543.95
1118B	PREMIUM GEL / BENTONITE	337.00	.2100	70.77
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	1030.00	1030.00
368 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
368 CASING FOOTAGE	937.00	.00	.00
510 MIN. BULK DELIVERY	1.00	350.00	350.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00

JD 10/4

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KCC WICHITA

Parts:	1642.72	Freight:	.00	Tax:	123.62	AR	3446.34
Labor:	.00	Misc:	.00	Total:	3446.34		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5289

GILLETTE, WY
307/686-4914

CONSOLIDATED
Oil Well Services, L.L.C.

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-487-8676

TICKET NUMBER 34923
LOCATION Ottawa
FOREMAN Alan Maden

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-18-12	11021	Gillespie 315	NE 30	14	22	Yo
CUSTOMER Bradley Oil			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 21614			516	Alan Maden	Set Job	Meet
CITY STATE ZIP CODE Oklahoma City OK 73156			368	Alan Maden		
JOB TYPE <u>long string</u>			675	Set Det	5D	
HOLE SIZE <u>5 7/8</u>			675 510	Set Job	5T	
CASING DEPTH <u>937</u>			HOLE DEPTH <u>948</u>		CASING SIZE & WEIGHT <u>2 7/8</u>	
SLURRY WEIGHT			TUBING		OTHER	
DISPLACEMENT			WATER gal/sk		CEMENT LEFT in CASING <u>yes</u>	
DISPLACEMENT PSI <u>800</u>			MIX PSI <u>200</u>		RATE <u>4 bpm</u>	

REMARKS: held crew meet established rate. Mixed & pumped 100# gel followed by 141 gals 50/50 cement plus 2 1/2 gal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve. Held pressure for 30 minutes. M.T.T.

HAT, E Bil

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030.00
5402	30	MILEAGE	368	120.00
5402	937	Casing footage	368	
5407	min	ten miles	510	350.00
5502C	2	80 val	675	180.00
1124	141	50/50 cement		1543.95
1118B	337#	gel		70.77
4402	1	2 1/2 plug		28.00
RECEIVED				
DEC 28 2012				
KCC WICHITA				
SALES TAX				123.62
ESTIMATED TOTAL				3446.31

Revin 3737

NO company rep
Jim OKid

AUTHORIZATION _____ 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 for

253046