



KANSAS CORPORATION COMMISSION 1101565  
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 # 31171  
Name: Continental Operating Co.  
Address 1: 1221 MCKINNEY STE 3700  
Address 2:  
City: HOUSTON State: TX Zip: 77010 + 2046  
Contact Person: Greg Mitschke  
Phone: ( 713 ) 209-1110  
CONTRACTOR: License # 32128  
Name: Rome Corporation dba Western Well Service  
Wellsite Geologist: n/a  
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: John P Jennings  
Well Name: Baldwin #5  
Original Comp. Date: 11/21/1977 Original Total Depth: 3780  
 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 #:

8/30/2012 11/12/2012  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-163-20757-00-01  
Spot Description:  
N2 NE NW Sec. 9 Twp. 10 S. R. 19  East  West  
4950 Feet from  North /  South Line of Section  
3300 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Rooks  
Lease Name: Baldwin Well #: 3  
Field Name:  
Producing Formation: Arbuckle  
Elevation: Ground: 2212 Kelly Bushing: 2212  
Total Depth: 3873 Plug Back Total Depth:  
Amount of Surface Pipe Set and Cemented at: 202 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: 1585 Feet  
If Alternate II completion, cement circulated from:  
feet depth to: w/ sx cmf.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: ppm Fluid volume: bbls  
Dewatering method used: Hauled to Disposal  
Location of fluid disposal if hauled offsite:  
Operator Name: Continental Operating Co.  
Lease Name: Stamper "C" License #: 31171  
Quarter NE Sec. 32 Twp. 8 S. R. 17  East  West  
County: Rooks Permit #: E26,843-0003

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



1101565

Operator Name: Continental Operating Co. Lease Name: Baldwin Well #: 3  
 Sec. 9 Twp. 10 S. R. 19  East  West County: Rooks

**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:  Cement Bond Gamma Ray 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>Anhydrite</td> <td>1589</td> <td>-623</td> </tr> <tr> <td>Arbuckle</td> <td>3766</td> <td>-1554</td> </tr> </table>	Name	Top	Datum	Anhydrite	1589	-623	Arbuckle	3766	-1554
Name	Top	Datum								
Anhydrite	1589	-623								
Arbuckle	3766	-1554								

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
Production	7.87	5.50	14.0	3820	common	250	10%salt,2%gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	0-1584	60/40	440	6%gel

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

TUBING RECORD: Size: <u>2.875 sealtite</u> Set At: _____ Packer At: <u>3797</u> 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 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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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# Quality Well Service, Inc.

324 Simpson St.  
Pratt, KS 67124

# Invoice

Date	Invoice #
10/26/2012	C-683

Bill To
Continental Operating P.O. Box 52 Hays, KS 67601

P.O. No.	Terms	Lease Name
		Baldwin #3

Description	Qty	Rate	Amount
Common	515	15.50	7,982.50T
Poz	175	9.50	1,662.50T
Gel	28	20.50	574.00T
Salt	21	13.00	273.00T
5 1/2 Centralizer	7	50.00	350.00T
5 1/2 Basket	1	190.00	190.00T
5 1/2 AFU Float Shoe	1	275.00	275.00T
5 1/2 LD Plug & Baffle	1	225.00	225.00T
5 1/2 DV Tool	1	2,800.00	2,800.00T
2 Stage	1	2,700.00	2,700.00T
Handling	739	2.10	1,551.90
.08 * sacks * miles	20,000	0.08	1,600.00
LMV	40	2.00	80.00
Pump Truck Mileage	40	8.00	320.00
Discount	2,554.8	-1.00	-2,554.80T
Discount	532.79	-1.00	-532.79
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Baldwin #3 Rooks Co.			

Thank You for your business!

<b>Subtotal</b>	\$17,496.31
<b>Sales Tax (6.3%)</b>	\$912.06
<b>Total</b>	\$18,408.37

# QUALITY WELL SERVICE, INC.

5739

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410  
Office / Fax 620-672-3663

Rich's Cell 620-727-3409  
Brady's Cell 620-727-6964

Date <i>10-25-12</i>	Sec.	Twp.	Range	County	State	On Location	Finish
Lease <i>Baldwin</i>	Well No. <i>3</i>		Location <i>Zurich KS 25 1/2 W S. 140</i>				
Contractor <i>CO TOOLS</i>				Owner			
Type Job <i>2-Stage pipe job</i>				To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size		T.D.		Charge To <i>Continental</i>			
Csg. <i>5-1/2</i>		Depth <i>3932</i>		Street			
Tbg. Size		Depth		City			
Tool		Depth		State			
Cement Left in Csg.		Shoe Joint		The above was done to satisfaction and supervision of owner agent or contractor.			
Meas Line		Displace <i>93 bbl and 34 bbl</i>		Cement Amount Ordered <i>250 sx com 10% salt 2%</i>			
<b>EQUIPMENT</b>							
Pumptrk	No. <i>8</i>	<i>Lady</i>		<i>440 sx 60/40 6% gel</i>			
Bulktrk	No. <i>10</i>	<i>Weale</i>		Common <i>515</i>			
Bulktrk	No. <i>5</i>	<i>Mike</i>		Poz. Mix <i>175</i>			
Pickup	No.			Gel. <i>28</i>			
				Calcium			
<b>JOB SERVICES &amp; REMARKS</b>							
Rat Hole				Hulls			
Mouse Hole				Salt <i>21</i>			
Centralizers				Flowseal			
Baskets <i>Insert @ 3817</i>				Kol-Seal			
<i>DN or Port Collar set @ 1584</i>				Mud CLR 48			
<i>Ron sts of 5-1/2 casing and landing st</i>				CFL-117 or CD110 CAF 38			
				Sand			
				Handling <i>739</i>			
				Mileage <i>40</i>			
<b>FLOAT EQUIPMENT</b>							
<i>1st Circulation with pump truck</i>				Guide Shoe			
<i>Hooked up and mixed 250 sx com 10% salt 2% gel - shut down and washed pump and line clean - released plug and disp 93 bbl of 1120 - lifting pressure @ 7000 ps. plug landed @ 1700 ps. - released and float held - <del>dropped</del> dropped dart and washed 15 min - Hooked up and opened DV tool @ 140 ps. - mixed 440 sx 60/40 6% gel sh. + down and released plug - disp 38 bbl of 1120 - plug landed @ 1000 ps.</i>				Centralizer <i>7 - 5-1/2</i>			
				Baskets <i>1 - 5-1/2</i>			
				AFU Inserts			
				Float Shoe <i>1 - 5-1/2</i>			
				Latch Down <i>1 - 5-1/2</i>			
				<i>1 - 5-1/2 DV Tool</i>			
				Pumptrk Charge <i>2 stage.</i>			
				Mileage <i>40</i>			
<i>Cement did circulate to surface !!</i>				<i>Thank You!!</i>			
Signature <i>Kelly R. Fox</i>							
				Tax			
				Discount			
				Total Charge			