

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1105608

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 # 6142		API No. 15
Name: Town Oil Company Inc.		Spot Description:
16205 W 287TH ST		NW_NW_NE_NW_Sec. 24 Twp. 18 S. R. 21 ▼ East West
Address 2:		
City: PAOLA State: KS	Zip: 66071 + 8482	
Contact Person: LESTER TOWN		Footages Calculated from Nearest Outside Section Corner:
Phone: ( 913 ) 294-2125		□ne □nw ☑se □sw
CONTRACTOR: License # 6142		County: Miami
Name:Town Oil Company Inc.		Lease Name: Haddock Well #: 4
Wellsite Geologist: N/A		Field Name:
Purchaser:		Producing Formation: PAOLA-RANTOUL
Designate Type of Completion:		Elevation: Ground: 907 Kelly Bushing: 0
✓ New Well Re-Entry	Workover	Total Depth: 562 Plug Back Total Depth:
✓ oil □wsw □swp	□ slow	Amount of Surface Pipe Set and Cemented at: 20 Feet
Gas D&A ENHR	□ sigw	Multiple Stage Cementing Collar Used? ☐ Yes ✓ No
□ og □ gsw	Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)		If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):		feet depth to:w/sx cmt
If Workover/Re-entry: Old Well Info as follows:		
Operator:		Duilling Shaid Management Dies
Well Name:		Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original	Total Depth:	Chloride content: 1500 ppm Fluid volume: 80 bbls
Deepening Re-perf. Conv.	to ENHR Conv. to SWD	Dewatering method used: Evaporated
Conv.	to GSW	Dewatering metrod used.
Plug Back: P	lug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:		Operator Name:
Dual Completion Permit #:		Lease Name: License #:
SWD Permit #: _		
ENHR Permit #:		Quarter Sec. Twp. S. R. East West
GSW Permit #: _	· · · · · · · · · · · · · · · · · · ·	County: Permit #:
10/17/2012 10/19/2012	11/22/2012	
Spud Date or Date Reached TD Recompletion Date	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 I III Approved by: Deanna Garrison Date: 01/07/2013

Side Two

1105608

Operator Name: Tow	<u>n Oil Company I</u>	nc.	Lease Name	Haddock		Well #:4_		
Sec. 24 Twp. 18	s. R. <u>21</u>	✓ East  ☐ West	County: Mi	ami				
time tool open and clos	sed, flowing and shu s if gas to surface te	d base of formations per t-in pressures, whether s est, along with final chart( well site report.	hut-in pressure r	eached static level,	hydrostatic press	ures, bottom h	nole temperat	ture, fluid
Drill Stem Tests Taken (Attach Additional St	heets)	Yes No		Log Formatio	n (Top), Depth and	d Datum	Sam	nple
Samples Sent to Geolo	ogical Survey	☐ Yes 🗸 No	i	ame MMA RAY		Тор	Datu	ım
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	•	☐ Yes						
List All E. Logs Run:								
GAMMA RAY NUET	RON COMPLETIO	ON LOG						
	¥400-5	CASING	RECORD 7	New Used				
		Report all strings set-	1			T "0 '	T =	
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Addit	
SURFACE	9	6.25	10	20	PORTLAND	3	50/50 PO	Z
COMPLETION	5.625	2.875	8	546	PORTLAND	96	50/50 PO	Z
		ADDITIONAL	L CEMENTING (S	OUEEZE BECORD				
Purpose:	Depth Top Bottom	Type of Cement		# Sacks Used Type and Percent Addition			 S	
Protect Casing Plug Back TD Plug Off Zone	-	<u></u>			<b>-</b> 10.00			
	-							
Shots Per Foot		ON RECORD - Bridge Plu Footage of Each Interval Pe			icture, Shot, Cement mount and Kind of Ma		rd	Depth
		****		-				
		<del></del>					+	
							1	
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		I	
Date of First, Resumed F	Production, SWD or EN	NHR. Producing Met	thod:	Gas Lift	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Water E	Bbls. (	Sas-Oil Ratio	•	Gravity
	W 05 0 2	'	METUOD OF CC.	DI ETION:		DDODUOT	ION INTERVIT	
DISPOSITIO	ON OF GAS:	Open Hole	METHOD OF COM Perf. Du		mmingled	PRODUCTI	ION INTERVAL	:
(If vented, Sub		Other (Specify)			omit ACO-4)			

Lease Owner: TOC

Miami County, KS
Well: Haddock 4
Lease Owner: TOC

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding: 10/12/2012

## WELL LOG

oil-Clay       4         Lime       16         Shale       36         Lime       44         ed Bed       50         Shale       87         Lime       99         Shale       112         Lime       140         Shale       148         Lime       171         Shale       180         Shale       182         Lime       187         Shale       296         ndy Shale       324         sed Bed       328         Lime       351         Lime       365         Shale       370	
Lime       16         Shale       36         Lime       44         ted Bed       50         Shale       87         Lime       99         Shale       112         Lime       140         Shale       148         Lime       171         Shale       177         Lime       180         Shale       182         Lime       187         Shale       296         ndy Shale       324         ied Bed       328         Lime       351         Lime       365         Shale       370	
Lime       44         led Bed       50         Shale       87         Lime       99         Shale       112         Lime       140         Shale       148         Lime       171         Shale       180         Shale       182         Lime       187         Shale       296         ndy Shale       324         led Bed       328         Lime       351         Lime       365         Shale       370	
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Ided Bed     328       Lime     351       Lime     365       Shale     370	
Lime         365           Shale         370	
Lime         365           Shale         370	
ndy Lime 378	
Shale 412	
Lime 416	
Shale 433	
Lime 436	
Shale 450	
Lime 457	
Shale 477	
Lime 480	
Shale 481	
Sand 485	
Lime 487	
ndy Shale 493	
<del></del>	
ndy Shale 560	
Sand 564	
	Sand     485       Lime     487       ndy Shale     493       Sand     498       ndy Shale     560



TICKET NUMBER 35052

LOCATION O+taws

FOREMAN Alan Mader

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

## FIELD TICKET & TREATMENT REPORT

	r 800-467-8676	ŲĘI	MENT			
DATE	CUSTOMER#	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10.16.12	7823 Hadd	ock #4	NW 24	18	21	Mi
CUSTOMER	A . /					
Town	<i>0:1</i>		TRUCK#	DRIVER	TRUCK#	DRIVER
16205	W 287 ts		516	Mad Mad	Safet	Meet
CITY	STATE	ZIP CODE	368	12rl MED	1500	<del>-</del>
Papla	KS	66071	523	Can Det		
JOB TYPE OM			<u> </u>		1	7/0
CASING DEPTH	SWI DRILL PIPE			CASING SIZE & V	VEIGHT 0	7/8
_					OTHER P!	
SLURRY WEIGHT		OL WATER MENT PSI_800 MIX PSI		CEMENT LEFT in	CASING 1/C	<u>.                                    </u>
DISPLACEMENT_		_ 1.		RATE	pm	
REMARKS: 170	ld neetin	0 1 00	1- 170 - 170	VIIXed	+ pum	ped
100 - 64	tollowe	d by 92 c		em ont	plus	do
10 per	Sack. Lil	culated c		Plushed 800 Pc	pum	P
-Fumpa	ed ping	to pin. W	ell held	NOD P	<u> </u>	· · · · · · · · · · · · · · · · · · ·
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<u> 10 u</u>	un 5 cott			· · · · · · · · · · · · · · · · · · ·		
	un water	<u></u>		- 1	11 1	Ale I
	<u></u>			Alm	Made	
ACCOUNT	QUANITY or UNITS	DESCRIPTION	ON of SERVICES or PRÓ	7	UNIT PRICE	TOTAL
CODE	1			200	UNIT PRICE	TOTAL
5401	70	PUMP CHARGE		268		1030.00
5706		MILEAGE		210		80.00
3102	37/	Casing to	orage	368		2 50 5
5407	M 1-4	ton mil	e5	503		350,0
						· · · · · · · · · · · · · · · · · · ·
11741	$a_2$	1 50/50 1	Pian - V			1000 110
1124	92	50150 C	ement			1007.40
1/18/3	92 255#	921				53.55
1124 111813 4402	92 255# 1	9-1 21/2 plus				1007,40 53.55 28.20
1124 111813 4402	92 255# 1	921				53.55
1124 111813 4402	92 255# 1	9-1 21/2 plus				53,55
1124 111813 4402	92 255# 1	9-1 21/2 plus				53,55
111813 4402	92 255# 1	9-1 21/2 plus				53.55
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1124 111813 4402	92 255# 1	9-1 21/2 plus				53.53 28.25
111813 4402	92 255#	9-1 21/2 plus				53,53 28,23
1124 111813 4402	92 255# 1	9-1 21/2 plus				53.53 28.25
1124 111813 4402	92	9-1 21/2 plus		<del></del>		53.55 28.25
11813 4402	92 255#	9-1 21/2 plus		<del></del>		53.55 28.25

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.