



KANSAS CORPORATION COMMISSION 1094584
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 # 33025
Name: Smitherman, Leon C., Jr.
Address 1: 14331 TIPPERARY CIR
Address 2: _____
City: WICHITA State: KS Zip: 67230 + 1517
Contact Person: Leon C. Smitherman, Jr/
Phone: (316) 733-5434
CONTRACTOR: License # 32854
Name: Gulick Drilling Co., Inc.
Wellsite Geologist: Wm. Stout
Purchaser: NCRA

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>7/03/2012</u>	<u>7/07/2012</u>	<u>7/25/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-015-23946-00-00
Spot Description: _____
N2 NE SE SE Sec. 19 Twp. 24 S. R. 5 East West
1140 Feet from North / South Line of Section
330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW
County: Butler
Lease Name: WEBER Well #: B-2

Field Name: Joseph Southeast

Producing Formation: Mississippi

Elevation: Ground: 1428 Kelly Bushing: 1432

Total Depth: 2712 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: _____ 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: 1000 ppm Fluid volume: 500 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Leon C. Smitherman, Jr.

Lease Name: Weber "A" License #: 33025

Quarter SW Sec. 19 Twp. 24 S. R. 5 East West

County: Butler Permit #: E-30891

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: 01/14/2013

1094584

Operator Name: Smitherman, Leon C., Jr. Lease Name: WEBER Well #: B-2
 Sec. 19 Twp. 24 S. R. 5 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Cherokee	2481	-1047
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Ardmore	2521	-1087
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mississippi Chert	2556	-1122
		Mississippi Lime	2620	-1186
List All E. Logs Run:		Kinderhook	2632	-1198
Attached		Total Depth	2714	-1280

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	20	202	Class A	110	
Production	7.875	5.5	14	2712.72	Thickset	185	

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
2	12 Ft		1000 gal mud acid	2558-2570 Ft
2	10 Ft		3000 bw and 21000 Lbs sand Frac	2578-2588 Ft

TUBING RECORD: Size: 2.875 ins. Set At: 2538 Packer At: none Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: 07/25/2012 Producing Method: Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	35	0	90		41

DISPOSITION OF GAS: Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <input type="checkbox"/> <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: Open Hole <input type="checkbox"/> Perf. <input checked="" type="checkbox"/> Dually Comp. <input type="checkbox"/> <i>(Submit ACO-5)</i> <input type="checkbox"/> Commingled <input type="checkbox"/> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: <u>2558-2570</u> <u>2578-2588</u>
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Form	ACO1 - Well Completion
Operator	Smitherman, Leon C., Jr.
Well Name	WEBER B-2
Doc ID	1094584

All Electric Logs Run

Gama-neutron
Density micro
Induction
Sonic



CONSOLIDATED
Oil Well Services, LLC

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



ENTERED

TICKET NUMBER 34883

LOCATION EUREKA

FOREMAN KEVIN MCGOY

FIELD TICKET & TREATMENT REPORT

CEMENT API # 15-015-23946

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-7-12	7682	Webster # 2-2	19	245	SE	Butler
CUSTOMER Leon C. Smitherman JR.			Gulick Drig. R. 91			
MAILING ADDRESS 14331 Tippetary Circle						
CITY Wichita	STATE KS	ZIP CODE 67230				
TRUCK #						
DRIVER			TRUCK #		DRIVER	
			520	John S.		
			667	Chris B.		
			637	Jim M.		

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 2717' KB CASING SIZE & WEIGHT 5 1/2 14" new
 CASING DEPTH 2712' KB DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.6* SLURRY VOL 55 BBL 4/5 WATER gal/sk 90 CEMENT LEFT in CASING 10'
 DISPLACEMENT 66 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 5 1/2 Casing. BREAK Circulation w/ 15 BBL Fresh water.
Mixed 165 sks Thick Set Cement w/ 5" KOL-SEAL /SK @ 13.6* /gal = 55 BBL Slurry.
wash out Pump & Lines. Shut down. Release Latch down Plug. Displace Plug to Seat w/
66" BBL Fresh water. Final Pumping Pressure 900 PSI. Bump Plug to 1700 PSI, wait 2 mins.
Release Pressure. Float & Plug Held. Good Circulation @ ALL times while Cementing.
Job Complete. Rig down.

Note: Plug RAT Hole w/ 20 sks

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	20	MILEAGE	4.00	80.00
1126 A	185 sks	THICK SET Cement	19.20	3552.00
1110 A	925 *	KOL-SEAL 5" /SK	.46 *	425.50
5407	10.17 TONS	Ton Mileage Bulk Delv.	M/C	350.00
4203	1	5 1/2 Guide shoe	160.00	160.00
4228 B	1	5 1/2 AFU INSERT FLOAT Valve	172.00	172.00
4454	1	5 1/2 LATCH down Plug	254.00	254.00
4104	1	5 1/2 Cement BASKET	229.00	229.00
4130	4	5 1/2 x 7 7/8 Centralizers	48.00	192.00
5502 C	4 HRS	80 BBL VAC TRUCK	90.00	360.00
1123	3150 GALS	CITY WATER	16.50/1000	51.98
		Sub Total		6856.48
		THANK You 6.55%	SALES TAX	329.90
		251085	ESTIMATED TOTAL	7186.38

Rev'n 3737

AUTHORIZATION Jim Sullivan

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



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 34882 ✓
LOCATION EUREKA
FOREMAN Kevin McCoy

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

FIELD TICKET & TREATMENT REPORT

CEMENT *ACE #15-015-23946*

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
7-3-12	7682	Weber B-2	19	24S	5E	Butler	
CUSTOMER <i>Leon Smitherman Jr.</i>		Gulick Drly. Rig 1		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <i>14331 Tipperary Circle</i>				520	ALLEN B.		
CITY <i>Wichita</i>				515	CALIN H.		
STATE <i>KS</i>	ZIP CODE <i>67230</i>						

JOB TYPE SURFACE *0* HOLE SIZE 12 1/4 HOLE DEPTH 215' KB CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH 202' G.L. DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL. 27 BBL WATER gal/sk 6.5 CEMENT LEFT IN CASING 15'
 DISPLACEMENT 12" BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 5/8 Csg. Break Circulation w/ 5 BBL Fresh water. Mixed 110 SKS Class "A" Cement w/ 3% CaCl2, 2% Gel, 1/4" Flo-Seal /sk @ 15" /gal = 27 BBL Slurry. Displace w/ 12" BBL Fresh water. Shut casing in. Good Cement to Surface = 3 BBL Slurry to Pit. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 S	1	PUMP CHARGE	825.00	825.00
5406	15	MILEAGE	4.00	60.00
1104 S	110 SKS	Class "A" Cement	14.95	1644.50
1102	310 *	CaCl2 3%	.74 *	229.40
1118 B	200 *	Gel 2%	.21 *	42.00
1107	25 *	Flo-Seal 1/4" /sk	2.35 *	58.75
5407	5.17 TONS	Ton Mileage Bulk Delv.	M/c	350.00
			Sub Total	3209.65
			SALES TAX 6.55%	129.34
			ESTIMATED TOTAL	3338.99

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THANK YOU

6.55%

ESTIMATED TOTAL

3338.99

AUTHORIZATION *[Signature]*

TITLE *TP*

DATE 7-3-12

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.