

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**  
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 # 34195  
Name: James P. O'Connell  
Address 1: 16525 E. 35th St. Court  
Address 2: \_\_\_\_\_  
City: Independence State: MO Zip: 64055+  
Contact Person: James P. O'Connell  
Phone: (816) 373-5242  
CONTRACTOR: License # 5831  
Name: MOKAT Drilling  
Wellsite Geologist: none  
Purchaser: none  
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: None n-a  
Well Name: None  
Original Comp. Date: N/A Original Total Depth: N/A  
 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 #: \_\_\_\_\_

8-3-12    8-6-12  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date    Recompletion Date

API No. 15 - 037-22203-00-00  
Spot Description: \_\_\_\_\_  
NW SE NE SW Sec. 26 Twp. 30 s. R. 21  East  West  
1779 1815 Feet from  North /  South Line of Section  
3165 2145 Feet from  East /  West Line of Section  
OPS-KCC-  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: CRAWFORD  
Lease Name: Lawrence Well #: 2  
Field Name: McCune  
Producing Formation: Cattleman  
Elevation: Ground: 900? Kelly Bushing: ?  
Total Depth: 300' Plug Back Total Depth: 300' surface  
Amount of Surface Pipe Set and Cemented at: 40' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: N/A Feet  
If Alternate II completion, cement circulated from: 30  
feet depth to: surface w/ 71 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: n-a ppm Fluid volume: n-a bbls  
Dewatering method used: Air drilled  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: None  
Lease Name: N/A License #: N/A  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

**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.

Signature: James P. O'Connell  
Title: Operator Date: 3-14-13

**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: Dig Date: 3/25/13

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**KCC WICHITA**

Operator Name: James P. O'Connell Lease Name: Lawrence Well #: 2  
 Sec. 26 Twp. 30 S. R. 21  East  West County: Crawford

**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 copy of all Electric Wireline 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: <u>None</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum <u>Sand (OIL ODOR) 192-196</u>
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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"	8.625"		40'	Portland	10	n-a

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate ___ Protect Casing <b>XX</b> Plug Back TD ___ Plug Off Zone	0-300'	Portland	71	none

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
None	None	None	n-a

TUBING RECORD: Size: <u>None/dryhole</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>Not Applicable</u>		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>dryhole</u>	
Estimated Production Per 24 Hours	Oil Bbls. <u>0</u>	Gas Mcf <u>0</u>	Water Bbls. <u>0</u> Gas-Oil Ratio <u>0</u> Gravity <u>0</u>

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 <input checked="" type="checkbox"/> Other (Specify) <u>Plugged dry hole</u>	PRODUCTION INTERVAL: <u>none</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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# Kepley Well Service, LLC

19245 Ford Road  
Chanute, KS 66720

Date	Invoice #
8/29/2012	47081

Kenny Maffei  
948 S. 20th Street  
McCune, KS 66753

Bill Lawrence #2  
26-30-21  
Crawford County

Terms	Due Date
	8/29/2012

Description	Qty	Rate	Amount
Cement	71	10.00	710.00T
Pump Charge	1	500.00	500.00T
Pulling Unit	3	85.00	255.00T
Vacuum Truck	3	85.00	255.00T
Sales Tax		7.30%	125.56

Total	\$1,845.56
Payments/Credits	\$0.00
Balance Due	\$1,845.56

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