

S/7/13

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

**CONFIDENTIAL**

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 34669  
Name: Stephan Tufte  
Address 1: 7531 US 59 Hwy  
Address 2: \_\_\_\_\_  
City: Oskaloosa State: KS Zip: 66066 + \_\_\_\_\_  
Contact Person: Stephan Tufte  
Phone: ( 785 ) 231-8090  
CONTRACTOR: License # 5786  
Name: McGown 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: \_\_\_\_\_  
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>2/20/12</u>	<u>2/21/12</u>	<u>2/23/12</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 103-21344-00-00  
Spot Description: \_\_\_\_\_  
nw nw sw sw Sec. 24 Twp. 12 S. R. 20  East  West  
1,155 Feet from  North /  South Line of Section  
5,115 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Leavenworth  
Lease Name: Blaker Well #: 1  
Field Name: Wildcat  
Producing Formation: Squirrel  
Elevation: Ground: 884.2 Kelly Bushing: \_\_\_\_\_  
Total Depth: 1022 Plug Back Total Depth: 910  
Amount of Surface Pipe Set and Cemented at: 62 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: \_\_\_\_\_ ppm Fluid volume: 20 bbls  
Dewatering method used: evaporation & backfill  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: CONFIDENTIAL  
Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

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**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: Stephan Tufte  
Title: Agent Date: 5/07/12

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
Date: 5-7-12 to 5-7-13  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: NJ Date: 5-18-12

Operator Name: Stephan Tufte Lease Name: Blaker Well #: 1  
 Sec. 24 Twp. 12 S. R. 20  East  West County: Leavenworth

**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:	<input checked="" 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>Squirrel</td> <td>775, 14'</td> <td>109.2</td> </tr> </table>	Name	Top	Datum	Squirrel	775, 14'	109.2
Name	Top	Datum					
Squirrel	775, 14'	109.2					

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	8 1/4	7"		62	Portland	69	50# gel, 50# calcium, 25# coseal
Longstring	5 7/8"	2 7/8"		910	Portland	158	365# Gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
3	10', 777-787 depth	75 gal. HCL acid, 100# frac. gel, 3# Biocide, 3700# frac. sand	777-787

TUBING RECORD:		Size: 1" steel pipe	Set At: 0 - 907'	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. April 24, 2012		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
	0		18		

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-6)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <div style="text-align: center; font-weight: bold; font-size: 1.2em;">CONFIDENTIAL</div>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 34182  
LOCATION Ottawa  
FOREMAN Alan Mader

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-20-12	8111	Blaker #1	SW 24	12	20	LV
CUSTOMER <u>Tutte Enterprises</u>			TRUCK #			
MAILING ADDRESS <u>7531 US 59 Highway</u>			DRIVER			
CITY <u>Oskaloosa</u>		STATE <u>KS</u>	ZIP CODE <u>66066</u>	TRUCK #		DRIVER
JOB TYPE <u>surface</u>			HOLE SIZE <u>11 1/4</u>		HOLE DEPTH <u>62</u>	
CASING DEPTH <u>62</u>			DRILL PIPE		TUBING	
SLURRY WEIGHT			SLURRY VOL		WATER gal/sk	
DISPLACEMENT <u>2.5</u>			DISPLACEMENT PSI <u>100</u>		MIX PSI <u>-</u>	
REMARKS: <u>Hold crew meet. Established rate. Mixed + pumped</u>			CEMENT LEFT in CASING <u>yes</u>		RATE <u>4 bpm</u>	
<u>69 sk 50150 cement. Mixed with calcium water + 25#</u>			<u>flaseal. Circulated cement. Displaced casing with</u>			
<u>clean water. Closed valve.</u>						

McGowan, Frank

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE		825.00
54016	1.5	MILEAGE		20.25
5402	min	ten miles from Ottawa		330.00
5402	62	casing footage		
3502C	5	80vac		450.00
		Includes filling pits		
1124	69	50150 cement		755.55
1107	25 #	flaseal		58.75
1102	30 #	calcium		37.00
<u>247972</u>				

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Ravin 3737 no company rep AUTHORIZATION Jim OK'd TITLE MAY 07 2012 DATE CONFIDENTIAL SALES TAX ESTIMATED TOTAL 62.15 2558.45

I acknowledge that the payment terms, unless specifically amended in writing in 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



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 34185  
LOCATION Ottawa  
FOREMAN Alan Mader

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-23-12	8111	Blaker #1 <u>811</u>	S24	12	20	LV
CUSTOMER <u>Tuffe Enterprises</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>7531 US Hwy 59</u>			<u>576</u>	<u>Alan M</u>	<u>Safety Meet</u>	
CITY <u>Oskaloosa</u>			<u>368</u>	<u>Gary M</u>	<u>GM</u>	
STATE <u>KS</u>			<u>369</u>	<u>Derek M</u>	<u>DM</u>	
ZIP CODE <u>66066</u>			<u>510</u>	<u>Asam</u>	<u>AM</u>	
JOB TYPE	<u>long string</u>	HOLE SIZE	<u>5 7/8</u>	HOLE DEPTH	<u>910</u>	CASING SIZE & WEIGHT
CASING DEPTH	<u>910</u>	DRILL PIPE		TUBING		OTHER
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING
DISPLACEMENT	<u>5.3</u>	DISPLACEMENT PSI	<u>800</u>	MIX PSI	<u>200</u>	RATE
REMARKS: <u>Held crew meet. Established rate. Mixed + pumped 100# gel followed by 158 sk 50/150 cement plus 290 gel. Circulated cement. Flushed pump pumped plug to casing TD. Well held 800 PSI. Set float closed valve.</u>						

McGowan, Frank

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	45	MILEAGE		180.00
5402	910	Casing footage		
5407A	305.73	ton miles		409.68
5502C	2 1/2	80 val		225.00
1124	158 sk	50/150 cem		1730.10
1118B	365 #	gel		76.65
4402	1	2 1/2 plug		28.00
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				KCC WICHITA
				248032
				CONFIDENTIAL
				SALES TAX
				ESTIMATED TOTAL
				133.94
				3813.37

Revin 3797 NO company rep AUTHORIZATION Jim Ok'd TITLE KCC DATE MAY 07 2013

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.