



STATE OF MISSOURI  
GEOLOGICAL SURVEY PROGRAM  
APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

APPLICATION TO DRILL     DEEPEN     PLUG BACK     FOR AN OIL WELL     OR GAS WELL

NAME OF COMPANY OR OPERATOR: Town Oil Company, Inc.    DATE: 11/20/2013

ADDRESS: 16205 West 287th Street    CITY: Paola    STATE: KS    ZIP CODE: 66071

**DESCRIPTION OF WELL AND LEASE**

NAME OF LEASE: Setzer    WELL NUMBER: 3    ELEVATION (GROUND): 900

WELL LOCATION (GIVE FOOTAGE FROM SECTION LINES):  
825 ft. from  North  South section line    825 ft. from  East  West section line

WELL LOCATION: Sec. 22 Township 43 North Range 32     East  West    LATITUDE: 38.505488    LONGITUDE: 94.439039    COUNTY: Cass

NEAREST DISTANCE FROM PROPOSED LOCATION TO PROPERTY OR LEASE LINE: 165 FEET  
DISTANCE FROM PROPOSED LOCATION TO NEAREST DRILLING, COMPLETED OR APPLIED - FOR WELL ON THE SAME LEASE: 330' FEET

PROPOSED DEPTH: 600    DRILLING CONTRACTOR, NAME AND ADDRESS: Town Oilfield Services, Inc.    ROTARY OR CABLE TOOLS: Rotary    APPROX. DATE WORK WILL START: 11/25/2013

NUMBER OF ACRES IN LEASE: 20    NUMBER OF WELLS ON LEASE INCLUDING THIS WELL, COMPLETED IN OR DRILLING TO THIS RESERVOIR: 0  
NUMBER OF ABANDONED WELLS ON LEASE: 0

IF LEASE PURCHASED WITH ONE OR MORE WELLS DRILLED, FROM WHOM PURCHASED?  
NAME: \_\_\_\_\_    ADDRESS: \_\_\_\_\_    NO. OF WELLS PRODUCING: 0  
INJECTION: 0  
INACTIVE: 0  
ABANDONED: 0

STATUS OF BOND:     SINGLE WELL AMOUNT \$ \_\_\_\_\_     BLANKET BOND AMOUNT \$ 40,000     ON FILE     ATTACHED

REMARKS: (IF THIS IS AN APPLICATION TO DEEPEN OR PLUG BACK, BRIEFLY DESCRIBE WORK TO BE DONE, GIVING PRESENT PRODUCING/INJECTION ZONE AND EXPECTED NEW INJECTION ZONE. USE BACK OF FORM IF NEEDED)

PROPOSED CASING PROGRAM				APPROVED CASING - TO BE FILLED IN BY STATE GEOLOGIST			
AMOUNT	SIZE	WT/FT	CEMENT	AMOUNT	SIZE	WT/FT	CEMENT
20'	6 1/4"	14	3	<u>20'</u>	<u>6 1/4"</u>	<u>14</u>	<u>Full Length</u>
300'	2 7/8"	6.5	42	<u>300'</u>	<u>2 7/8"</u>	<u>6.5</u>	

I, the Undersigned, state that I am the President of the Town Oil (Company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.

SIGNATURE: Setzer Town    DATE: 11/20/2013

PERMIT NUMBER: 21346     DRILLER'S LOG REQUIRED     E-LOGS REQUIRED IF RUN  
 CORE ANALYSIS REQUIRED IF RUN     DRILL SYSTEM TEST INFO REQUIRED IF RUN  
 SAMPLES REQUIRED  
 SAMPLES NOT REQUIRED  
 WATER SAMPLES REQUIRED AT \_\_\_\_\_

APPROVED DATE: 11-25-13  
APPROVED BY: Joseph A. [Signature]

**NOTE**    THIS PERMIT NOT TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER LOCATION.

APPROVAL OF THIS PERMIT BY THE OIL AND GAS COUNCIL DOES NOT CONSTITUTE ENDORSEMENT OF THE GEOLOGIC MERITS OF THE PROPOSED WELL NOR ENDORSEMENT OF THE QUALIFICATIONS OF THE PERMITTEE

I, \_\_\_\_\_ of the \_\_\_\_\_ (Company), confirm that an approved drilling permit has been obtained by the owner of this well. Council approval of this permit will be shown on this form by presence of a permit number and signature of authorized council representative.

DRILLER'S SIGNATURE: \_\_\_\_\_    DATE: \_\_\_\_\_

fm  
2270'el

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NOV 20 2013

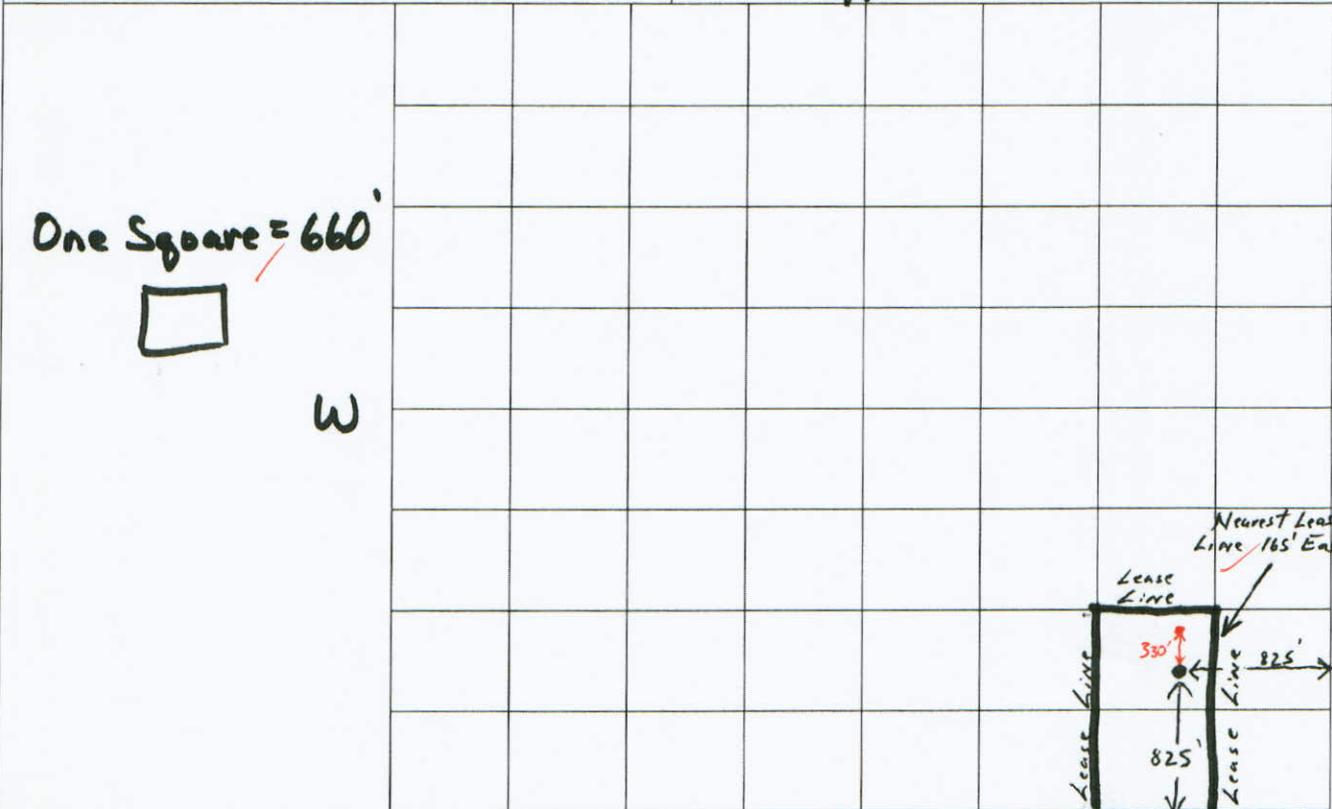
FORM OGC-4

Mo Oil & Gas Council



STATE OF MISSOURI  
MISSOURI DEPARTMENT OF NATURAL RESOURCES  
GEOLOGICAL SURVEY PROGRAM  
**WELL LOCATION PLAT**

OWNER'S NAME Tim L. Setzer	
LEASE NAME Setzer	COUNTY Cass
WELL LOCATION (GIVE FOOTAGE FROM SECTION LINES) 825 ft. from <input type="checkbox"/> North <input checked="" type="checkbox"/> South from section line 825 ft. from <input checked="" type="checkbox"/> East <input type="checkbox"/> West from section line	
WELL LOCATION Sec. 22 Township 43 North Range 32 <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
LATITUDE 38.505488	LONGITUDE 94.439039



REMARKS

**INSTRUCTIONS**

On the above plat, show distance of the proposed well from the two nearest section lines, the nearest lease line, and from the nearest well on the same lease completed in or drilling to the same reservoir. Do not confuse survey lines with lease lines. See rule 10 CSR 50-2.030 for survey requirements. Lease lines must be marked.

This is to certify that I have executed a survey to accurately locate oil and gas wells in accordance with 10 CSR 50-2.030 and that the results are correctly shown on the above plat.

REMIT TWO (2) COPIES TO:  
GEOLOGICAL SURVEY PROGRAM  
PO BOX 250, ROLLA, MO 65402-0250 (573) 368-2143  
ONE (1) COPY WILL BE RETURNED

REGISTERED LAND SURVEYOR	NUMBER
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## Check Location

Select a coordinate format, enter a pair of coordinates in the boxes below it, and then press the SUBMIT button. Please be patient while your information is retrieved. Your coordinates will be converted to the other formats, the information on the right-hand side of the page will be filled in based on your coordinates, and a map will be generated. NOTE: All coordinates must use the North American Datum of 1983 (NAD83).

Universal Transverse Mercator  
[Zone 15 North]

Easting  
374525.3842068798 meters

Northing  
4262883.519334177 meters

Decimal Degrees

Latitude  
38.505488 °

Longitude  
-94.439039 °

Degrees, Minutes and Seconds

Latitude Degrees  
38 °

Latitude Minutes  
30 '

Latitude Seconds  
19.756799999998975 ''

Longitude Degrees  
-94 °

Longitude Minutes  
26 '

Longitude Seconds  
20.5403999999978263 ''

<b>UTM Zone 15N [Easting, Northing]</b>	[ 374525.3, 4262883.5 ] meters
<b>Decimal Degrees [Lat, Lon]</b>	[ 38.505488°, -94.439039° ]
<b>Deg, Min, Sec [Lat, Lon]</b>	[ 38° 30' 19.7", -94° 26' 20.5" ]
<b>County Name</b>	Cass
<b>County FIPS Code</b>	037
<b>Legal Description</b>	Section 22 T43N R32W
<b>Municipality</b>	NO VALUE
<b>House District</b>	56
<b>Senate District</b>	31
<b>Congressional District</b>	4
<b>MoDNR Region</b>	Kansas City Regional Office
<b>USGS 1:24,000 Quadrangle</b>	Everett [38094-E4]
<b>8 Digit Watershed</b>	10290108 [South Grand]
<b>10 Digit Watershed</b>	1029010802 [Mormon Fork-South Grand River]
<b>12 Digit Watershed</b>	102901080203 [Black Creek-South Grand River]
<b>Special Well Drilling Area</b>	Area 2
<b>Ecological Drainage Unit</b>	Central Plains/Osage/South Grand
<b>Level III Ecoregion</b>	Central Irregular Plains
<b>Query Time</b>	6.641 s

Rows with red text indicate that the input location is too close to a boundary to produce reliable results.

NOTE: A result of 'NO VALUE' is usually an indication that no data was found for the location. For example, not every point in Missouri will lie within a municipal boundary, so some will result in a 'NO VALUE'. If 'County Name' results in 'NO VALUE', your point probably lies outside the state.

### Metadata

- [Interstate Highways](#)
- [US Highways](#)
- [State Highways](#)
- [Railroad](#)
- [Major and Minor Roads](#)
- [County Boundary](#)
- [Lakes](#)
- [Major Rivers](#)
- [Rivers and Streams](#)
- [Missouri River](#)
- [Mississippi River](#)
- [Municipal](#)

- Legend**
- Interstate Highways
- US Highways
- State Highways
- Railroad
- Major and Minor Roads
- County Boundary
- Lakes
- Major Rivers
- Rivers and Streams
- Missouri River
- Mississippi River
- Municipal



View Scale 1:24,000

DISCLAIMER: Although this map has been compiled by the Missouri Department of Natural Resources, no warranty, expressed or implied, is made by the department as to the data and related materials. The act of distribution shall not constitute any such warranty, and no responsibility is assumed by the department in the use of these data or related materials.



P.O. Box 176, Jefferson City, MO 65102  
800-361-4827 / 573-751-3443  
E-mail: [contact@dnr.mo.gov](mailto:contact@dnr.mo.gov)

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JAN 27 2014



STATE OF MISSOURI  
MISSOURI DEPARTMENT OF NATURAL RESOURCES  
GEOLOGICAL SURVEY PROGRAM  
**WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG**

FORM OGC-5

Mo Oil & Gas Council

NEW WELL  WORKOVER  DEEPEN  PLUG BACK  INJECTION  SAME RESERVOIR  DIFFERENT RESERVOIR  OIL  GAS  DRY

OWNER: Town Oil Company ADDRESS: 16205 West 287th Street Paola, KS 66071

LEASE NAME: Setzer WELL NUMBER: #3

LOCATION OF WELL: Sec. 23 Twp 43 North, Rng 31  East  West OR 825 ft. from  North  South 825 ft. from  East  West LATITUDE: 38.505488 LONGITUDE: 94.439039

COUNTY: Cass PERMIT NUMBER (OGC-3 OR OGC-31): 21346

DATE SPUDDED: 01/22/2014 DATE TOTAL DEPTH REACHED: 01/22/2014 DATE COMPLETED READY TO PRODUCE OR INJECT: ELEVATION (DF, RKR, RT, OR Gr.) FEET: 900 ELEVATION OF CASING HD. FLANGE FEET: 901

TOTAL DEPTH: 220 PLUG BACK TOTAL DEPTH:

PRODUCING OR INJECTION INTERVAL(S) FOR THIS COMPLETION: ROTARY TOOLS USED (INTERVAL) 9 1/2" TO 11 1/2" CABLE TOOLS USED (INTERVAL):

DRILLING FLUID USED: Air Rig

WAS THIS WELL DIRECTIONALLY DRILLED?  Yes  No WAS DIRECTIONAL SURVEY MADE?  Yes  No WAS COPY OF DIRECTIONAL SURVEY FILED?  Yes  No DATE FILED:

TYPE OF ELECTRICAL OR OTHER LOGS RUN (JUST LOGS FILED WITH THE STATE GEOLOGIST): DATE FILED:

**CASING RECORD**

CASING (REPORT ALL STRINGS SET IN WELL - CONDUCTOR, SURFACE, INTERMEDIATE, PRODUCING, ETC.)

PURPOSE	SIZE HOLE DRILLED	SIZE CASING SET	WEIGHT (LB. FT)	DEPTH SET	SACKS CEMENT	AMOUNT PULLED
Surface	9"	6 5/8"	14	21'	3	
Completion	5 5/8"	2 7/8"	10	195.2'	35	

**TUBING RECORD**

**LINER RECORD**

SIZE INCH	DEPTH SET FEET	PACKER SET AT FEET	SIZE INCH	TOP FEET	BOTTOM FEET	SACKS CEMENT	SCREEN FEET
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**PERFORATION RECORD**

**ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD**

NUMBER PER FEET	SIZE AND TYPE	DEPTH INTERVAL	AMOUNT AND KIND OF MATERIAL USED	DEPTH INTERVAL
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**INITIAL PRODUCTION**

DATE OF FIRST PRODUCTION OR INJECTION: PRODUCING METHOD (INDICATE IF FLOWING, GAS LIFT, OR PUMPING - IF PUMPING, SHOW SIZE AND TYPE OF PUMP.):

DATE OF TEST	HOURS TESTED	CHOKE SIZE	OIL PRODUCED DURING TEST BBLs	GAS PRODUCED DURING TEST MCF	WATER PRODUCED DURING TEST BBLs	OIL GRAVITY API (CORR.)
TUBING PRESSURE	CASING PRESSURE	CALCULATED RATE OF PRODUCTION PER 24 HOURS	OIL BBLs	GAS MCF	WATER BBLs	GAS OIL RATIO

DISPOSITION OF GAS (STATE WHETHER VENTED, USED FOR FUEL OR SOLD):

METHOD OF DISPOSAL OF MUD PIT CONTENTS: Hauled off

**CERTIFICATE:** I, the Undersigned, state that I am the Pres of the TOC (Company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

DATE: 1/27/2014 SIGNATURE: Lester Town

**INSTRUCTIONS:** Attach drillers log or other acceptable log of well.

\* Show all important zones of porosity, detail of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

**DETAIL OF FORMATIONS PENETRATED**

FORMATION	TOP	BOTTOM	DESCRIPTION (SEE * ABOVE)
See Attached Driller's Log			

JAN 27 2014

# Log Book

Well No. #3

Farm Setzer

Mo (State) Cass (County)

22 (Section) 43 (Township) 32 (Range)

For Town Oil  
(Well Owner)

**Town Oilfield Services, Inc.**  
1207 N. 1st East  
Louisburg, KS 66053  
913-710-5400

Setzer Farm: Cass County

Mo State: Well No. #3 Oil & Gas Council

Elevation 900

Commenced Spuding 1-22 .20 14

Finished Drilling 1-22 .20 14

Driller's Name Chad Weaver

Driller's Name \_\_\_\_\_

Driller's Name \_\_\_\_\_

Tool Dresser's Name Jeff Town

Tool Dresser's Name \_\_\_\_\_

Tool Dresser's Name \_\_\_\_\_

Contractor's Name Tos

22 43 32

(Section) (Township) (Range)

Distance from S line, 825 ft.

Distance from E line, 825 ft.

### 3 sacks CASING AND TUBING RECORD

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_

~~6 7/8~~ Set 21' 8" Pulled \_\_\_\_\_

6 1/4" Set \_\_\_\_\_ 6 1/4" Pulled \_\_\_\_\_

4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_

~~2 7/8~~ Set 195.2 2" Pulled \_\_\_\_\_

220 TD

Thickness of Strata	Formation	Total Depth	Remarks
7	Soil/Clay	7	
32	Shale	39	
4	Sand	43	very, little show
35	Shale	78	
2	Coal	80	
5	Shale	85	Water
1	Sand	86	
1	Shale	87	
4	Sand	91	no oil
8	Sand	99	odor, oil sand, ok bleeding
28	Sand	127	
3	Sandy lime	130	
3	Sand	133	Black sand
7	Shale	140	
4	Lime	144	
3	Shale	147	
13	Lime	160	
2	Broken Sand	162	no oil
1	Sand	163	2% - 5% very little bleeding
1	Sand	164	10% - 15%
1	Sand	165	2% - 5%
1	broken Sand	166	NO OIL
14	Shale	180	
4	Lime	184	
24	Shale	208	
12	Lime	220	TD

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Town Oilfield Service

JAN 27 2014

P.O Box 339 Louisburg, Ks 66053  
913-837-8400

Mo Oil & Gas Council

Ticket Number \_\_\_\_\_  
Location \_\_\_\_\_  
Foreman \_\_\_\_\_

Field Ticket & Treatment Report  
Cement

Date	Customer#	Well Name & Number	Section	Township	Range	County
1-25-14		Setzer 3#	22	43	32	Cass
Customer TOR Cast		Mailing Address				
		City	State	Zip Code		

Job Type long string Hole Size 5 5/8 Hole Depth 220 Casing Size & Weight 2 7/8  
 Casing Depth 195.2 Drill Pipe \_\_\_\_\_ Tubing \_\_\_\_\_ Other \_\_\_\_\_  
 Displacement 4.6 Displacement PSI 200 Mix PSI 100 Rate 4 BPM

Remarks Rigged up, Established Rate Down casing. mixed + pumped  
120# Gel total 13y 100% cement. Circumferential cement. Fisher  
Pumped + pumped plug. Shut in at 750 psi

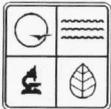
Account Code	Quantity or Units	Description of Services or Product	Unit Price	Total
		Pump Charge		700
		Cement Truck		250
		Water Truck		150
	35	Cement	8.5	297.5
	2	Gel	15	30
	1	Plug		25
			Sales Tax	
Estimated Total				1452.50

Authorization \_\_\_\_\_ 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.

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APR 29 2014 FORM OGC-5



STATE OF MISSOURI  
MISSOURI DEPARTMENT OF NATURAL RESOURCES  
GEOLOGICAL SURVEY PROGRAM

## WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

Mo Oil & Gas Council

NEW WELL    WORKOVER    DEEPEN    PLUG BACK    INJECTION    SAME RESERVOIR    DIFFERENT RESERVOIR    OIL    GAS    DRY

OWNER Town Oil Company		ADDRESS 16205 West 287th Street Paola, KS 66071			
LEASE NAME Setzer		WELL NUMBER #3			
LOCATION OF WELL	SEC TWN RNG	OR	BLOCK AND SURVEY	LATITUDE	LONGITUDE
Sec. 2	Twp 4	North, Rng 3	<input type="checkbox"/> East <input checked="" type="checkbox"/> West	OR 825 ft. from	<input type="checkbox"/> North <input checked="" type="checkbox"/> South 825 ft. from <input checked="" type="checkbox"/> East <input type="checkbox"/> West
COUNTY Cass	PERMIT NUMBER (OGC-3 OR OGC-31) 21346				
DATE SPUDDED 01/22/2014	DATE TOTAL DEPTH REACHED 01/22/2014	DATE COMPLETED READY TO PRODUCE OR INJECT 04/29/2014	ELEVATION (DF, RKR, RT, OR Gr.) FEET 900	ELEVATION OF CASING HD. FLANGE 902 FEET	
TOTAL DEPTH 220	PLUG BACK TOTAL DEPTH N/A				
PRODUCING OR INJECTION INTERVAL(S) FOR THIS COMPLETION 161-164			ROTARY TOOLS USED (INTERVAL) ____ TO ____ DRILLING FLUID USED		CABLE TOOLS USED (INTERVAL)
WAS THIS WELL DIRECTIONALLY DRILLED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	WAS DIRECTIONAL SURVEY MADE? <input type="checkbox"/> Yes <input type="checkbox"/> No	WAS COPY OF DIRECTIONAL SURVEY FILED? <input type="checkbox"/> Yes <input type="checkbox"/> No	DATE FILED		
TYPE OF ELECTRICAL OR OTHER LOGS RUN (JUST LOGS FILED WITH THE STATE GEOLOGIST) Gamma Ray Neutron Completion Log					DATE FILED 02/14/2014

### CASING RECORD

CASING (REPORT ALL STRINGS SET IN WELL – CONDUCTOR, SURFACE, INTERMEDIATE, PRODUCING, ETC.)

PURPOSE	SIZE HOLE DRILLED	SIZE CASING SET	WEIGHT (LB. FT)	DEPTH SET	SACKS CEMENT	AMOUNT PULLED
Surface	9"	6 5/8"	14	21'	3	
Completion	5 5/8"	2 7/8"	10	195.2'	35	

### TUBING RECORD

### LINER RECORD

SIZE	DEPTH SET	PACKER SET AT	SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN
INCH	FEET	FEET	INCH	FEET	FEET		FEET

### PERFORATION RECORD

### ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

NUMBER PER FOOT	SIZE AND TYPE	DEPTH INTERVAL	AMOUNT AND KIND OF MATERIAL USED	DEPTH INTERVAL
4	2" DML RTG	161 - 164	Acid 500 Gal. 7.5% HCL	161 - 164

### INITIAL PRODUCTION

DATE OF FIRST PRODUCTION OR INJECTION		PRODUCING METHOD (INDICATE IF FLOWING, GAS LIFT, OR PUMPING – IF PUMPING, SHOW SIZE AND TYPE OF PUMP.)				
DATE OF TEST	HOURS TESTED	CHOKE SIZE	OIL PRODUCED DURING TEST BBLS	GAS PRODUCED DURING TEST MCF	WATER PRODUCED DURING TEST BBLS	OIL GRAVITY API (CORR.)
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DISPOSITION OF GAS (STATE WHETHER VENTED, USED FOR FUEL OR SOLD)

METHOD OF DISPOSAL OF MUD PIT CONTENTS

**CERTIFICATE:** I, the Undersigned, state that I am the \_\_\_\_\_ of the \_\_\_\_\_ (Company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

DATE	SIGNATURE
------	-----------

APR 29 2014

ONE (1) COPY TO BE RETURNED.

Mo Oil & Gas Council

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