



KANSAS CORPORATION COMMISSION 1061671
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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

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 #: _____

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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: _____ Date: _____



1061671

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
---	---

CASING RECORD <input 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

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
-----------------------------------	-----------	---------	-------------	---------------	---------

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 <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
--	--	---

Form	ACO1 - Well Completion
Operator	Mull Drilling Company, Inc.
Well Name	Bowie 1-14
Doc ID	1061671

Tops

Name	Top	Datum
Anhydrite	1377	+ 822
B/Anhydrite	1396	+ 803
Heebner Shale	3714	- 1515
Lansing	3767	- 1568
Stark Shale	4055	- 1856
B/KC	4085	- 1886
Marmaton	4124	- 1925
Pawnee	4205	- 2006
Ft. Scott	4270	- 2071
Cherokee Shale	4298	- 2099
Mississippian	4348	- 2149
Osage	4370	- 2171

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

August 17, 2011

Mark Shreve
Mull Drilling Company, Inc.
1700 N WATERFRONT PKWY
BLDG 1200
WICHITA, KS 67206

Re: ACO1
API 15-083-21702-00-00
Bowie 1-14
NW/4 Sec.14-21S-22W
Hodgeman County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Mark Shreve



CONSOLIDATED
Oil Well Services, L.L.C.

TICKET NUMBER 28072

LOCATION Oakley

FOREMAN Fuzzy

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
5-12-11	5659	Bowling 1-14	14	21S	22W	Madison

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Mull Dals	463	Mark G		
MAILING ADDRESS	558	Corey D		
		Miles S		

CITY	STATE	ZIP CODE

JOB TYPE 5.0 sack HOLE SIZE 7 7/8 HOLE DEPTH 229' CASING SIZE & WEIGHT 8 5/8 . 20 #
 CASING DEPTH 228' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15.5 SLURRY VOL 1.34 WATER gal/sk 6.5 CEMENT LEFT in CASING 15'
 DISPLACEMENT 13.8 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Monday 8 res up to circulate
used 8 5/8 s wdg.
mixed 160 sks common 390cc 290cc then displaced
13.34 bbls
cement did circulate approx 7 bbls

Thanks Fuzzy crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	10.95 ⁰⁰	10.95 ⁰⁰
5406	25	MILEAGE	5.00	125.00
5407	7.5	Tax mileage Delivery (mile)	1.28	410.00
11045	160	Class 'A' cement	16.80	2688.00
1118 B	301 #	Beadonite	.24	72.24
1102	451	Calcium Chloride	.84	378.84
			sub total	4699.00
			+ sales tax 7.5%	198.78
			sub total	4897.78
			less 15% disc	-704.71
				4192.99

241390

Rev'n 9737
 AUTHORIZATION Lodis Fair TITLE _____ DATE _____
 ESTIMATED TOTAL _____

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 for

Macklin W. Armstrong
 Geologist
 316-206-8227 Cell
 316-500-0770 Office
 Kansas License Number 713

COMPANY **MULL DRILLING COMPANY**
 WELL **BOWIE NO. 1-14**
 FIELD **WILDCAT**
 COUNTY **HODGEMAN** STATE **KANSAS**

Location: 361° ENL 4 970' CWL
 TWP 21S R22W
 Elevation: 2199 KB
 Date: 5-12-11
 Time: 14:00
 Operator: MURFIN
 Drilling Company: RIG 8
 Compressed: 5-20-11
 LTD: 4400

Drilling Time: 3600-LD
 Sample Interval: 3600-TD
 Daily Penetration Rate of 7" min
 5-12-11 11:44 400 5 PMD @ 330m
 5-14-11 17:00 DRILLING
 5-15-11 2:00 DRILLING
 5-16-11 3:00 DRILLING
 5-17-11 3:30 DRILLING
 5-18-11 4:30 DRILLING
 5-19-11 4:50 DRILLING
 5-20-11 4:50 P-4A

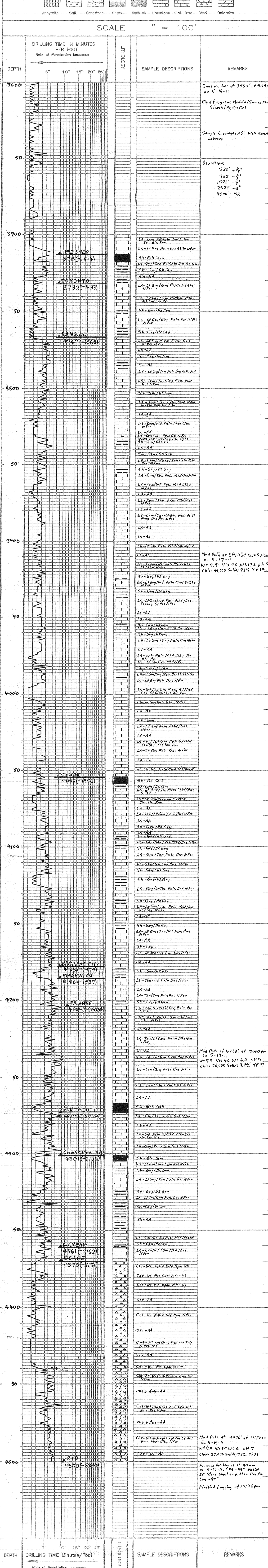
REMARKS: DUE TO THE LACK OF OIL SHOWS AND THE E-LOG CALCULATIONS, IT WAS DECIDED TO PLUG THIS TEST WELL.

Respectfully submitted,
Macklin W. Armstrong

BIT RECORD	
Make & Type	Serial No.
1 1/2" VAREL CMB	RR
7/8" HTC GX 20C	5191685
15-16-15	14-14-15
0	228
228	4500
140 1/2	

Formation	Sample	Log	Datum	Formation	Sample	Log	Datum
ANHYDRITE	1379	1377	+822				
B/ANHYDRITE	1398	1396	+803				
HEBNER	3713	3714	-1515				
TORONTO	3732	3732	-1533				
LANSING	3767	3767	-1568				
STARK	4055	4054	-1955				
B/KANSAS CITY	4178	4177	-1978				
MARATON	4186	4185	-1986				
PAWNEE	4204	4204	-2005				
FORT SCOTT	4273	4273	-2074				
CHEROKEE SHALE	4301	4299	-2100				
WARSAW	4361	4359	-2160				
OSAGE	4370	4369	-2170				
TOTAL DEPTH	4500	4500	-2301				

* Structural Position to: SMOKEY OIL COMPANY
NO. 14-14 COX NE NE SEC. 14 T21S R22W



COMPANY **MULL DRILLING COMPANY**
 LEASE **BOWIE NO. 1-14**
 LOCATION **361° ENL 4 970' CWL SEC 14 TWP 21S R22W**
 COUNTY **HODGEMAN** STATE **KANSAS**
 ELEVATION: **2199 KB**