



KANSAS CORPORATION COMMISSION 1063694  
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: \_\_\_\_\_



1063694

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
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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
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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	New Gulf Operating LLC
Well Name	Grasslands 1
Doc ID	1063694

Tops

Name	Top	Datum
Anhydrite	2541	
Base Anhydrite	2564	
Stotler	2622	
Topeka	3752	
Heebner	3876	
Lansing	4027	
Muncie Creek	-	
Stark	-	
BKC	4330	
Pawnee	4454	
Cherokee	4535	
Johnson	4568	
Morrow	4606	
Miss	4635	

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

September 26, 2011

New Gulf Operating LLC  
6310 E. 102nd St.  
TULSA, OK 74137

Re: ACO1  
API 15-109-21031-00-00  
Grasslands 1  
NE/4 Sec.08-12S-32W  
Logan 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,



**DIAMOND TESTING**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(800) 542-7313  
**DRILL-STEM TEST TICKET**  
FILE: \_\_\_\_\_

TIME ON: \_\_\_\_\_  
TIME OFF: \_\_\_\_\_

Company \_\_\_\_\_ Lease & Well No. \_\_\_\_\_  
Contractor \_\_\_\_\_ Charge to \_\_\_\_\_  
Elevation \_\_\_\_\_ Formation \_\_\_\_\_ Effective Pay \_\_\_\_\_ Ft. Ticket No. \_\_\_\_\_  
Date \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Range \_\_\_\_\_ W County \_\_\_\_\_ State **KANSAS**  
Test Approved By \_\_\_\_\_ Diamond Representative \_\_\_\_\_

Formation Test No. \_\_\_\_\_ Interval Tested from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Total Depth \_\_\_\_\_ ft.  
Packer Depth \_\_\_\_\_ ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
Packer Depth \_\_\_\_\_ ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
Depth of Selective Zone Set \_\_\_\_\_

Top Recorder Depth (Inside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Bottom Recorder Depth (Outside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type \_\_\_\_\_ Viscosity \_\_\_\_\_ Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
Weight \_\_\_\_\_ Water Loss \_\_\_\_\_ cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
Chlorides \_\_\_\_\_ P.P.M. Drill Pipe Length \_\_\_\_\_ ft. I.D. 3 1/2 in.  
Jars: Make STERLING Serial Number \_\_\_\_\_ Test Tool Length \_\_\_\_\_ ft. Tool Size 3 1/2-IF in.  
Did Well Flow? \_\_\_\_\_ Reversed Out \_\_\_\_\_ Anchor Length \_\_\_\_\_ ft. Size 4 1/2-FH in.  
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: \_\_\_\_\_  
2nd Open: \_\_\_\_\_

Recovered _____ ft. of _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

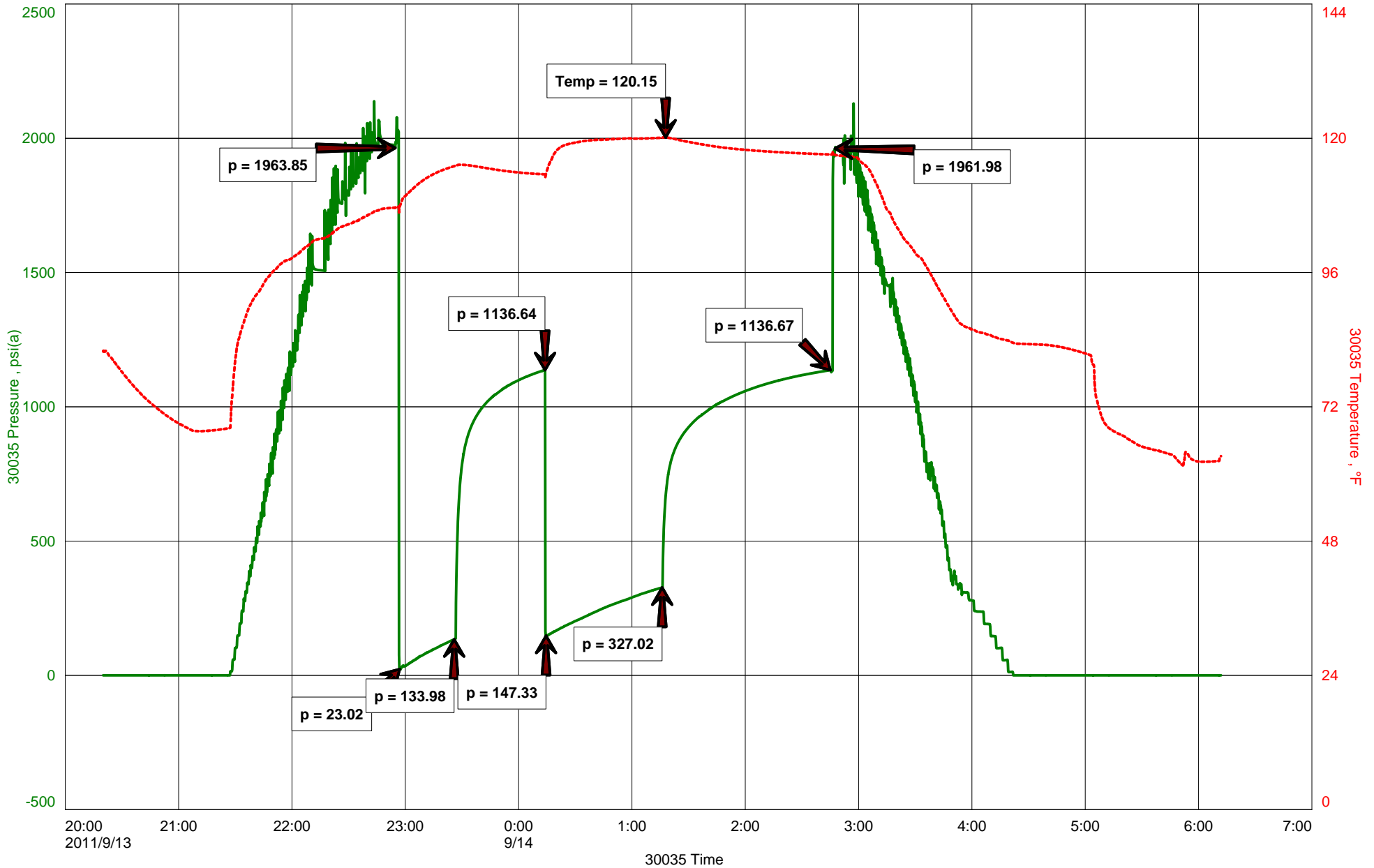
Time Set Packer(s) \_\_\_\_\_ A.M. P.M. Time Started Off Bottom \_\_\_\_\_ A.M. P.M. Maximum Temperature \_\_\_\_\_  
Initial Hydrostatic Pressure..... (A) \_\_\_\_\_ P.S.I.  
Initial Flow Period..... Minutes \_\_\_\_\_ (B) \_\_\_\_\_ P.S.I. to (C) \_\_\_\_\_ P.S.I.  
Initial Closed In Period..... Minutes \_\_\_\_\_ (D) \_\_\_\_\_ P.S.I.  
Final Flow Period..... Minutes \_\_\_\_\_ (E) \_\_\_\_\_ P.S.I. to (F) \_\_\_\_\_ P.S.I.  
Final Closed In Period..... Minutes \_\_\_\_\_ (G) \_\_\_\_\_ P.S.I.  
Final Hydrostatic Pressure..... (H) \_\_\_\_\_ P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

New Gulf Operating LLC  
DST# 1 Lansing 4070-4126'  
Start Test Date: 2011/09/13  
Final Test Date: 2011/09/14

Grasslands # 1  
Formation: DST# 1 Lansing 4070-4126'  
Pool: Wildcat  
Job Number: S0025

# Grasslands # 1



# Diamond Testing

## General information Report

### General Information

**Company Name** New Gulf Operating LLC

<b>Contact</b>	Jim Henkle	<b>Job Number</b>	S0025
<b>Well Name</b>	Grasslands # 1	<b>Representative</b>	Jacob McCallie
<b>Unique Well ID</b>	DST# 1 Lansing 4070-4126'	<b>Well Operator</b>	New Gulf Operating LLC
<b>Surface Location</b>	Sec 8-12S-32W Logan County	<b>Report Date</b>	2011/09/14
<b>Well License Number</b>		<b>Prepared By</b>	Jacob McCallie
<b>Field</b>	Wildcat		
<b>Well Type</b>	Vertical		

<b>Test Type</b>	Drill Stem Test		
<b>Formation</b>	DST# 1 Lansing 4070-4126'		
<b>Well Fluid Type</b>	01 Oil	<b>Start Test Time</b>	20:20:00
		<b>Final Test Time</b>	06:12:00
<b>Start Test Date</b>	2011/09/13		
<b>Final Test Date</b>	2011/09/14		
<b>Gauge Name</b>	30035		
<b>Gauge Serial Number</b>			

### Test Results

#### RECOVERED:

630' Mud Cut Water 98% WTR 2% MUD  
630' Total Fluid

#### TOOL SAMPLE:

99% WTR 1% MUD

Ph: 7

CHLORIDES: 59,000 ppm

RW: .18 @ 55 degrees F



**DIAMOND TESTING**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(800) 542-7313  
**DRILL-STEM TEST TICKET**  
FILE: \_\_\_\_\_

TIME ON: \_\_\_\_\_  
TIME OFF: \_\_\_\_\_

Company \_\_\_\_\_ Lease & Well No. \_\_\_\_\_  
Contractor \_\_\_\_\_ Charge to \_\_\_\_\_  
Elevation \_\_\_\_\_ Formation \_\_\_\_\_ Effective Pay \_\_\_\_\_ Ft. Ticket No. \_\_\_\_\_  
Date \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Range \_\_\_\_\_ W County \_\_\_\_\_ State **KANSAS**  
Test Approved By \_\_\_\_\_ Diamond Representative \_\_\_\_\_

Formation Test No. \_\_\_\_\_ Interval Tested from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Total Depth \_\_\_\_\_ ft.  
Packer Depth \_\_\_\_\_ ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
Packer Depth \_\_\_\_\_ ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
Depth of Selective Zone Set \_\_\_\_\_

Top Recorder Depth (Inside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Bottom Recorder Depth (Outside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type \_\_\_\_\_ Viscosity \_\_\_\_\_ Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
Weight \_\_\_\_\_ Water Loss \_\_\_\_\_ cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
Chlorides \_\_\_\_\_ P.P.M. Drill Pipe Length \_\_\_\_\_ ft. I.D. 3 1/2 in.  
Jars: Make STERLING Serial Number \_\_\_\_\_ Test Tool Length \_\_\_\_\_ ft. Tool Size 3 1/2-IF in.  
Did Well Flow? \_\_\_\_\_ Reversed Out \_\_\_\_\_ Anchor Length \_\_\_\_\_ ft. Size 4 1/2-FH in.  
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: \_\_\_\_\_  
2nd Open: \_\_\_\_\_

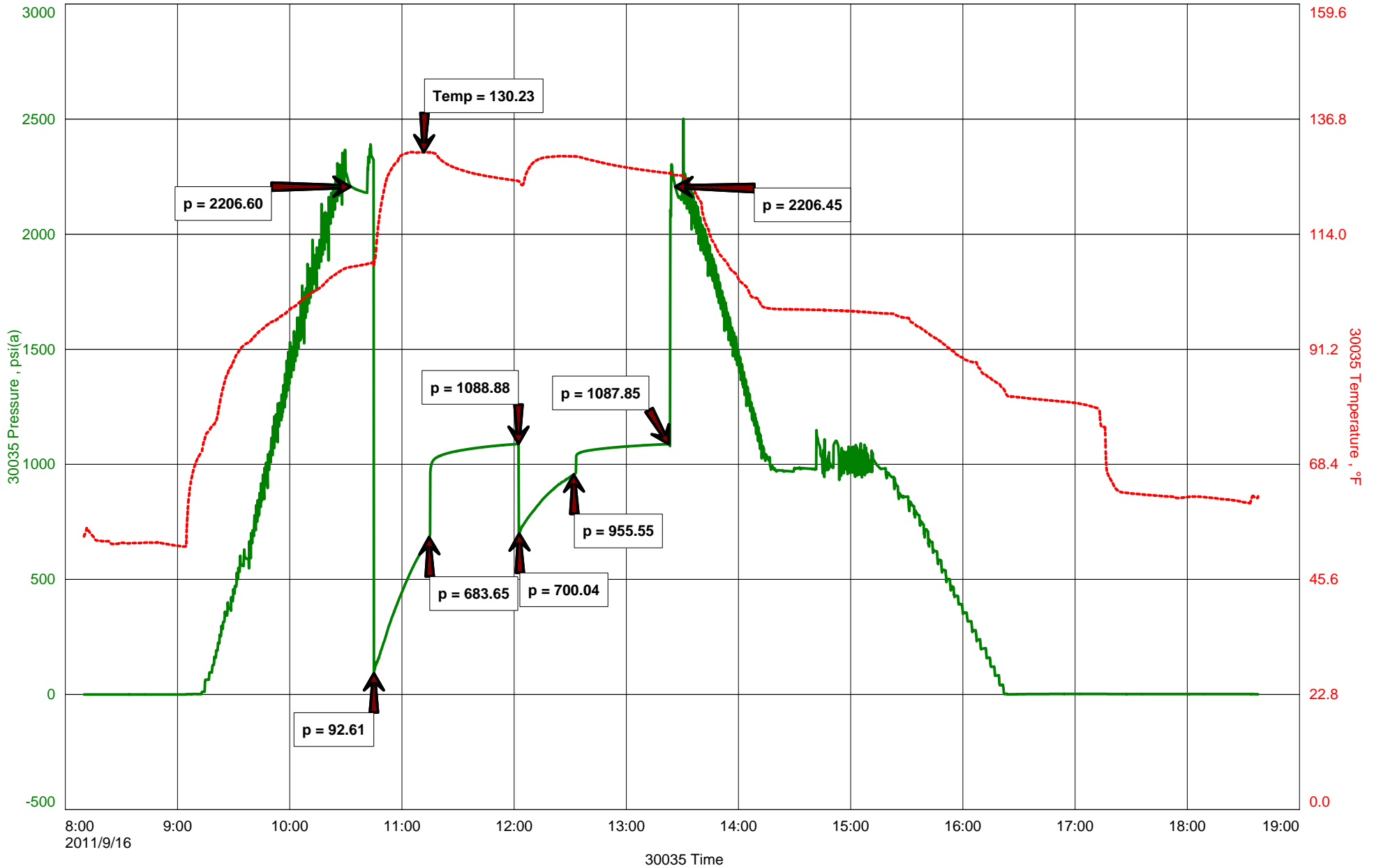
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
	Total

Time Set Packer(s) \_\_\_\_\_ A.M. P.M. Time Started Off Bottom \_\_\_\_\_ A.M. P.M. Maximum Temperature \_\_\_\_\_  
Initial Hydrostatic Pressure..... (A) \_\_\_\_\_ P.S.I.  
Initial Flow Period..... Minutes \_\_\_\_\_ (B) \_\_\_\_\_ P.S.I. to (C) \_\_\_\_\_ P.S.I.  
Initial Closed In Period..... Minutes \_\_\_\_\_ (D) \_\_\_\_\_ P.S.I.  
Final Flow Period..... Minutes \_\_\_\_\_ (E) \_\_\_\_\_ P.S.I. to (F) \_\_\_\_\_ P.S.I.  
Final Closed In Period..... Minutes \_\_\_\_\_ (G) \_\_\_\_\_ P.S.I.  
Final Hydrostatic Pressure..... (H) \_\_\_\_\_ P.S.I.

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# Grasslands #1



# Diamond Testing

## General information Report

### General Information

**Company Name** New Gulf Operating LLC

<b>Contact</b>	Jim Henkle	<b>Job Number</b>	S0026
<b>Well Name</b>	Grasslands #1	<b>Representative</b>	Jacob McCallie
<b>Unique Well ID</b>	DST # 2 Johnson 4530-4600'	<b>Well Operator</b>	New Gulf Operating LLC
<b>Surface Location</b>	SEC. 8-12S-32W Logan County	<b>Report Date</b>	2011/09/16
<b>Well License Number</b>		<b>Prepared By</b>	Jacob McCallie
<b>Field</b>	Wildcat		
<b>Well Type</b>	Vertical		

<b>Test Type</b>	Drill Stem Test		
<b>Formation</b>	DST # 2 Johnson 4530-4600'		
<b>Well Fluid Type</b>	01 Oil	<b>Start Test Time</b>	08:10:00
		<b>Final Test Time</b>	18:39:00
<b>Start Test Date</b>	2011/09/16		
<b>Final Test Date</b>	2011/09/16		
<b>Gauge Name</b>	30035		
<b>Gauge Serial Number</b>			

### Test Results

#### RECOVERED:

3' Clean Oil  
2103' OC Muddy WTR  
2106' TOTAL FLUID

100% OIL  
5% Oil 65% WTR 30% MUD  
Bubbles in WTR during recovery- Not present during grind out

PH: 7

Chlorides: 29,000 ppm  
RW: .29 @ 59 degrees F

#### Tool Sample:

1% Oil 98% WTR 1% Mud

# DRILLING REPORT

**NEW GULF ENERGY**  
 6310 E. 102<sup>nd</sup> Street  
 Tulsa, Oklahoma 74137  
 Office (918) 728-3020

**# 1 GRASSLANDS**  
 1255' FEL 815'FNL  
 Section 8-T12S-R32W  
 Logan County, Kansas

Drilling Contractor: VAL DRILLING RIG 4 (620-617-2793)  
 Larry Hinderliter 620-804-0097 Toolpusher

Geologist: Curtis Covey 316-258-9976 /  
 Joe Baker 316-253-9696  
 Comparison Well: New Gulf Energy

Elevation: **GL 3009 KB 3019**

API # 15-109-21031

**# 1 RACETTE**  
 10-12S-32W

New Gulf Rep : Danny Birdwell 432-940-6680/ Engineer JoJo Birdwell 432-634-0773/Jim Henkle 620-617-2868

	SAMPLE TOPS	DATUM		SHOWS
ANHYDRITE	2541	+478	+12	
BASE ANHYDRITE	2564	+465	+13	
STOTLER	3622	-603	+17	
TOPEKA	3752	-733	+13	
HEEBNER	3976	-957	+15	
	4027	-1008	+4	D- Zn 4074-80 Staining E-F Zn 4085-95 Show Free Oil, Fluorescence, Few Gas Bubbs, Odor, Dk Brn Stain DST # 1
LANSING				
MUNCIE CREEK	No Pick			
STARK	No Pick			
BKC	4330	-1311	-5	
PAWNEE	4454	-1435	-1	
CHEROKEE SHALE	4535	-1516	-2	
JOHNSON	4568	-1549	-4	Ls Tan Vuggy, CrytoxIn, Fossil Porosity, Good Odor, Fluor. Free Oil, Gas Bubbs, Lt Brn Stain Pos Cut/ Resid Pos Acid Resid DST # 2
MORROW	4606	-1587	-13	
MISS	4635	-1616	-24	
RTD	4720	-1701		
LTD				

9/7/11 Spud  
 9/8/11 251'  
 9/9/11 1415'

9/10/11 2420'  
9/11/11 3080'  
9/12/11 3545'  
9/13/11 4040' DST # 1 Lansing D-E-F  
9/14/11 4126' Drilling ahead

DST # 1 Lansing D,E,F (interval 49'-99' in the Lansing)

4074-4126

30-45-60-90

**Recovery: 690' Mud Cut Water (2% Mud 98% Water) gas bubbles in water**

IFP: Strong OBB in 11 min

FFP: Strong OBB in 14 min

IFP/FFP: 23-134/147-327#

ISP/FSP: 1137/1137# BHT: 120 deg

9/15/11 4383' working on mud pump

9/16/11 Dst #2 4530-4600 Johnson Zone

DST # 2 Johnson

4530-4600

30-45-30-45

IFP: OBB in 2 Min

ISP: No Blow

FFP: OBB in 2:15 Min

FSP: No Blow

**Recovery: 3' Clean Oil, 2103' Oil Cut Muddy Water (5% Oil ,65% Mud,30% Mud)**

IFP/FFP: 93-684/700-956#

ISP/FSP: 1098/1088#

IHP/FHP: 2207/2206# Temp: 130 deg

9/17/11 RTD 4720' Should have logs by noon



**CONSOLIDATED**  
Oil Well Services, LLC

*File*

BUCKET NUMBER 28207  
LOCATION Oaklayks  
FOREMAN Kelly Gable  
Walt Dinkel

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
9-7-11	5661	Grasslands 1	8	12 <sup>s</sup>	32 <sup>w</sup>	Logan
CUSTOMER <u>New Gulf Operating LLC</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			<u>463</u>	<u>Damon Miller</u>		
CITY			<u>439</u>	<u>CaCl Parker</u>		
STATE						
ZIP CODE						

JOB TYPE Surface C HOLE SIZE 12 1/4 HOLE DEPTH 268' CASING SIZE & WEIGHT 8 5/8 - 20  
CASING DEPTH 264' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT 1512 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 15'  
DISPLACEMENT 16 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 6 BPM

REMARKS: Safety Meeting, Rig up on Val Dels #4, on bottom circ  
mix 200 SKs com, 3% acc - 2% Cel, release Plug + Displace 16 BBL  
H<sub>2</sub>O @ 200 #, shut in

Cement Did Circ

*Thank You*  
*Kelly + Crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1,025 <sup>00</sup>	1,025 <sup>00</sup>
5406	8	MILEAGE	5 <sup>00</sup>	40 <sup>00</sup>
11043	200 SKs	Class A Cement	16 <sup>80</sup>	3,360 <sup>00</sup>
1102	564 #	Calcium Chloride	184	473 <sup>76</sup>
1118B	376 #	Bentonite	124	96 <sup>24</sup>
<del>5407</del> 4432#	1	8 5/8 Woodan Plug	96 <sup>00</sup>	96 <sup>00</sup>
5407	9.4	Ton Release Delivery	158	410 <sup>00</sup>
				5,495 <sup>00</sup>
		Less 10% Disc		549 <sup>50</sup>
				4,945 <sup>50</sup>
			SALES TAX	282 <sup>20</sup>
			ESTIMATED TOTAL	5227 <sup>70</sup>

Ravin 3737

AUTHORIZATION *[Signature]* 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

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 244124

Invoice Date: 09/14/2011 Terms: 10/10/30,n/30 Page 1

NEW GULF OPERATING LLC  
6310 EAST 102ND ST.  
TULSA OK 74137  
(918)728-3020

GRASSLANDS1  
28207  
8-12S-32W  
09-07-2011  
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	200.00	16.8000	3360.00
1102	CALCIUM CHLORIDE (50#)	564.00	.8400	473.76
1118B	PREMIUM GEL / BENTONITE	376.00	.2400	90.24
4432	8 5/8" WOODEN PLUG	1.00	96.0000	96.00

Sublet Performed	Description	Total
9999-130	CASH DISCOUNT	-402.00
9999-130	CASH DISCOUNT	-147.50

Description	Hours	Unit Price	Total
463 CEMENT PUMP (SURFACE)	1.00	1025.00	1025.00
463 EQUIPMENT MILEAGE (ONE WAY)	8.00	5.00	40.00
463 MIN. BULK DELIVERY	1.00	410.00	410.00

COMPANY NGO-KS  
WELL # Grasslands #1  
AFE # \_\_\_\_\_  
OIL ACCT CODE 1570-14  
OIL DESCRIPT Cementing  
OIL MILEAGE/DATE \_\_\_\_\_  
AUTHORIZED/DATE 9-19-11 WHK

Amount Due 5808.56 if paid after 10/14/2011

Parts:	4020.00	Freight:	.00	Tax:	282.20	AR	5227.70
Labor:	.00	Misc:	.00	Total:	5227.70		
Sublt:	-549.50	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_

Date \_\_\_\_\_

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

February 28, 2012

Jim Henkle  
New Gulf Operating LLC  
6310 E. 102nd St.  
TULSA, OK 74137

Re: ACO-1  
API 15-109-21031-00-00  
Grasslands 1  
NE/4 Sec.08-12S-32W  
Logan County, Kansas

Dear Jim Henkle:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 09/07/2011 and the ACO-1 was received on February 27, 2012 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department