



KANSAS CORPORATION COMMISSION 1067216  
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 Recompletion Date      Date Reached TD      Completion Date or 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: \_\_\_\_\_



1067216

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

November 10, 2011

John Loyd  
Excel Oil & Gas L.L.C.  
PO BOX 68  
BUCYRUS, KS 66013-0068

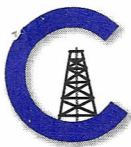
Re: ACO1  
API 15-019-27075-00-00  
Winders 15-4  
NW/4 Sec.15-34S-12E  
Chautauqua County, Kansas

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,  
John Loyd



**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 # 245083

=====  
Invoice Date: 10/21/2011 Terms: 10/10/30,n/30 Page 1  
=====

J. B. D. % P. J. BUCK  
P.O. BOX 68  
SEDAN KS 67361  
(620)725-3636

WINDERS 15-4  
32498  
10/13/11  
15-34S-12E  
KS

Part Number	Description	Qty	Unit Price	Total
1102	CALCIUM CHLORIDE (50#)	100.00	.7000	70.00
1104S	CLASS "A" CEMENT (SALE)	50.00	14.2500	712.50
1107A	PHENOSEAL (M) 40# BAG	40.00	1.2200	48.80
1118B	PREMIUM GEL / BENTONITE	100.00	.2000	20.00
1123	CITY WATER	1260.00	.0156	19.66

Sublet Performed	Description	Total
9999-240	CASH DISCOUNT	-121.70
9999-240	CASH DISCOUNT	-87.10

Description	Hours	Unit Price	Total
398 CEMENT PUMP (SURFACE)	1.00	775.00	775.00
NUNNE WATER TRANSPORT (CEMENT)	1.00	112.00	112.00
551 MIN. BULK DELIVERY	1.00	330.00	330.00

Amount Due 2160.25 if paid after 11/20/2011

Parts:	870.96	Freight:	.00	Tax:	65.06	AR	1944.22
Labor:	.00	Misc:	.00	Total:	1944.22		
Sublt:	-208.80	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

#245083

TICKET NUMBER 32498  
LOCATION Bartlesville, OK  
FOREMAN Kirk Sanders

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
10-13-11	4291	Winders 15-4	15	345	12E	CO
CUSTOMER (JBD) Excel Oil & Gas						
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
			398	Jahn		
			551	Bryan / Chris		
				Nimbley's		
CITY		STATE	ZIP CODE			

JOB TYPE Surf. HOLE SIZE 11 HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 8 5/8  
CASING DEPTH 53' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT 15.6 SLURRY VOL. 1.18 WATER gal/sk 5.2 CEMENT LEFT in CASING Approx. 10'  
DISPLACEMENT 2.7 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Pan fell from to est. circ., ran 50sx of 2% calcium cement & disp. shut down & washed up.

— Circ. Cement to Surf. —

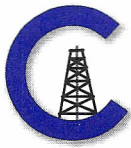
#5 gals Meth  
105 TO 15 CP

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE		775 <sup>00</sup>
—	—	MILEAGE		—
5407	1	Bulk Trk		330 <sup>00</sup>
5501C	1 hr	Transport		112 <sup>00</sup>
1102	100 <sup>lb</sup>	Calcium	*	70 <sup>00</sup>
11045	50sx	Cement (Class A)	*	712 <sup>50</sup>
1107A	40 <sup>lb</sup>	Plena Seal	*	48 <sup>00</sup>
1118B	100 <sup>lb</sup>	Premium Gel	*	20 <sup>00</sup>
1123	420gal	City Water	*	19 <sup>66</sup>
<p><u>10% Disc. Price \$1,944.22</u></p>				
		8.3% SALES TAX		65.00
		ESTIMATED TOTAL		2,160 <sup>25</sup>

Revin 3737

AUTHORIZATION L. Smith 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 # 245090

=====  
Invoice Date: 10/21/2011    Terms: 15/15/30,n/30    Page 1

J. B. D. % P. J. BUCK  
P.O. BOX 68  
SEDAN KS 67361  
(620)725-3636

WINDERS 15-4  
182000170  
10/15/11  
15-34-12  
KS

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	105.00	18.3000	1921.50
1107A	PHENOSEAL (M) 40# BAG)	80.00	1.2200	97.60
1110A	KOL SEAL (50# BAG)	500.00	.4400	220.00
1118B	PREMIUM GEL / BENTONITE	150.00	.2000	30.00
1123	CITY WATER	4000.00	.0156	62.40
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00

Sublet Performed	Description	Total
9999-240	CASH DISCOUNT	-321.10
9999-240	CASH DISCOUNT	-356.48

Description	Hours	Unit Price	Total
NUNNE WATER TRANSPORT (CEMENT)	4.00	112.00	448.00
551 MIN. BULK DELIVERY	1.00	330.00	330.00
T-133 CEMENT PUMP	1.00	975.00	975.00
T-133 EQUIPMENT MILEAGE (ONE WAY)	45.00	4.00	180.00
T-133 CASING FOOTAGE	989.00	.21	207.69

Amount Due 4714.44 if paid after 11/20/2011

Parts:	2376.50	Freight:	.00	Tax:	167.66	AR	4007.27
Labor:	.00	Misc:	.00	Total:	4007.27		
Sublt:	-677.58	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_

# 245090



CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	JBD	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	LS	Section	15	Excess (%)	30
Customer Acct #	4291	TWP	34	Density	13.8
Well No.	1076	RGE	12	Water Required	
Mailing Address	Winders #15-4	Formation		Yield	1.75
City & State		Hole Size	6 3/4	Slurry Weight	
Zip Code		Hole Depth	1020	Slurry Volume	
Contact		Casing Size	4 1/2 INCH, J-55 (10.5 LBS)	Displacement	15.75
Email		Casing Depth	989	Displacement PSI	350
Cell		Drill Pipe		MIX PSI	200
Dispatch Location	BARTLESVILLE	Tubing	2 7/8	Rate	5

Code	Cement Pump Charge and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$975.00	\$ 975.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	45	PER MILE	\$4.00	\$ 180.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$330.00	\$ 330.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
	FOOTAGE	989	PER FOOT	\$0.21	\$ 207.69
<b>EQUIPMENT TOTAL</b>					<b>\$ 1,692.69</b>

Cement, Chemicals and Water					
1126A	THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CHLORIDE)	105	0	\$18.30	\$ 1,921.50
1107A	PHENOSEAL	80	0	\$1.22	\$ 97.60
1110A	KOL SEAL (50 # SK)	500	0	\$0.44	\$ 220.00
1118B	PREMIUM GEL/BENTONITE (50#)	150	0	\$0.20	\$ 30.00
1123	CITY WATER (PER 1000 GAL)	4	0	\$15.60	\$ 62.40
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>CHEMICAL TOTAL</b>					<b>\$ 2,331.50</b>

Water Transport					
5501C	WATER TRANSPORT (CEMENT)	4	WATER TRANSPORT (CEMENT)	\$112.00	\$ 448.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>TRANSPORT TOTAL</b>					<b>\$ 448.00</b>

Cement Floating Equipment (TAXABLE)					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
4404	4' 1/2" RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
0			0	\$0.00	\$ -
<b>CEMENT FLOATING EQUIPMENT TOTAL</b>					<b>\$ 45.00</b>

DRIVER NAME	
561 1133	Williams, Chancey
551	Marrs, Casey
Nunnley TP	

SUB TOTAL	\$ 4,517.19
(-DISCOUNT) 15%	\$ 877.58
SALES TAX	167.44
<b>DISCOUNTED TOTAL</b>	<b>\$ 4,007.27</b>

AUTHORIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

TITLE John [Signature]  
FOREMAN [Signature]

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.

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	JBD	State, County	Chautauqua , Kansas	Cement Type	CLASS A
Customer Acct #	LS	Section	15	Excess (%)	30
Well No.	1076	TWP	34	Density	13.8
Mailing Address	Winders #15-4	RGE	12	Water Required	0
City & State	0	Formation	0	Yield	1.75
Zip Code	0	Hole Size	6 3/4	Slurry Weight	0
Contact	0	Hole Depth	1020	Slurry Volume	0
Email	0	Casing Size	1 1/2 INCH, J-55 (10.5 LBS)	Displacement	15.75
Cell	0	Casing Depth	989	Displacement PSI	350
Office	0	Drill Pipe	0	MIX PSI	200
Dispatch Location	BARTLESVILLE	Tubing	2 7/8	Rate	5

REMARKS

Pumped 3 sks gel ahead est. circulation, pumped 105 sks thick set cement flushed pump and lines displaced plug to bottom set shoe shut in. Circulated cement to surface.

3

Safety M/T 6  
 Coop  
 Chaney  
 Casey