



KANSAS CORPORATION COMMISSION 1068775  
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: \_\_\_\_\_



1068775

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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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 <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 31524

LOCATION Encke

FOREMAN Rick Ledford

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT** *API # 15-125-32105*

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-7-11	4758	Westfall 146-1	1	31S	13E	MG
CUSTOMER <u>Layne Energy</u>			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS <u>P.O. Box 1100</u>			520 Allen B.			
CITY <u>Sycamore</u>			479 Kevin M.			
STATE <u>KS</u>			637 Danny B.			
ZIP CODE <u>67363</u>						

JOB TYPE L/S 0 HOLE SIZE 6 3/4" HOLE DEPTH 1513' CASING SIZE & WEIGHT 4 1/2" 10.5"  
 CASING DEPTH 1511' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.4# SLURRY VOL 23 Bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'  
 DISPLACEMENT 24 Bbl DISPLACEMENT PSI 1000 ~~PSI~~ 1400 Bump plug RATE \_\_\_\_\_

REMARKS: Safety meeting - Rig up to 4 1/2" casing w/ wash head. Break circulation w/ 28 Bbl fresh water. Washdown 182' to PBTD. Sweep hole w/ 10 sks gel. Rig up to cement. Pump 6 sks gel-flush w/ hulls, 5 Bbl water spacer, 15 Bbl caustic soda pre-flush. Mixed 25 sks thickset cement w/ 8" Kol-sol/w, 1/2" phenoxal + 14% CSC-15 @ 13.0"/gal. Washout pump + lines, release latch down plug. Displace w/ 24 Bbl fresh water. Final pump pressure 1000 PSI. Bump plug to 1400 PSI. release pressure, float + plug held. Good circulation @ all times while cementing. Job complete. Rig down

*"Thank You"*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	40	MILEAGE	4.00	160.00
1126A	25 sks	thickset cement	18.30	1372.50
1110A	600#	8" Kol-sol/w	.40	264.00
1107A	100#	1/2" phenoxal/w	1.22	122.00
1135A	20#	14% CSC-15	9.95	199.00
1117B	800#	gel-flush	.20	160.00
1105	50#	hulls	.42	21.00
1103	100#	caustic soda	1.52	152.00
5614	5 hrs	welder	80.00	400.00
5407	4.1	tan mileage bulk trk	m/c	330.00
5502C	5 hrs	80 Bbl vac. TRK	90.00	450.00
1123	3000 gals	city water	15.00/1000	46.80
4156	1	4 1/2" flapper valve float shoe	175.00	175.00
4453	1	4 1/2" latch down plug	155.00	155.00
4311	1	4 1/2" weld on collar	70.00	70.00
			Subtotal	5052.30
			6.3%	SALES TAX
			ESTIMATED	172.47
			TOTAL	5224.77

Ravin 3737

AUTHORIZATION [Signature]

TITLE PT

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

Air Drilling Specialist  
Oil & Gas Wells

**THORNTON AIR ROTARY, LLC**  
Office Phone: 620-879-2073

PO Box 449  
Caney, KS 67333

Date Started	<b>8/30/2011</b>
Date Completed	<b>9/1/2011</b>

Well No.	Operator	Lease	A.P.I #	County	State
<b>14 G-1</b>	<b>Layne Energy Operating</b>	<b>West Fall</b>	<b>15-125-32105-00-00</b>	<b>Montgomery</b>	<b>Kansas</b>

	1/4	1/4	1/4	Sec.	Twp.	Rge.
				<b>1</b>	<b>31 S</b>	<b>13 E</b>

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
<b>Billy</b>	<b>Gas</b>	<b>4</b>	<b>22.2' 8 5/8</b>	<b>1513</b>	<b>6 3/4</b>

### Formation Record

0-4	DIRT	1031-1032	COAL (MULBERRY)	1327-1333	SHALE
4-10	CLAY	1032-1034	SHALE	1333-1338	SAND
10-270	SHALE	1034-1069	LIME (PAWNEE)	1338-1382	SHALE
270-283	LIME	1069-1071	SHALE	1382-1390	RED SHALE
283-466	LMY SHALE	1071-1075	BLK SHALE (LEXINGTON)	1390-1397	SHALE
466-467	COAL	1075-1115	SHALE	1397-1398	COAL (ROWE)
467-479	SANDY SHALE	1115-1136	LIME (OSWEGO)	1398-1439	SHALE
479-500	SAND (DAMP)	1136-1146	BLK SHALE (SUMMIT)	1439-1440	COAL (RIVERTON)
500-540	SANDY SHALE	1146-1154	LIME	1440-1445	SANDY SHALE
540-566	LIME	1154-1161	BLK SHALE (EXCELLO)	1445-1471	SHALE
566-580	LMY SHALE	1161-1162	COAL (MULKY)	1462	G.T.-1/2#,1/4"= 4 MCF
580-694	LIME (DAMP)	1162-1165	LIME	1471-1496	MISS. CHAT (MISS.)
691	WENT TO WATER	1165-1203	SHALE	1481	G.T.-1#, 1/4"= 8.95 MCF
694-700	SAND/ 711-G.T.-NO GAS	1203-1204	COAL (BEVEIR)	1488	GAS TEST- SAME
700-754	SANDY SHALE	1204-1219	SHALE	1496-1513	BROWN LIME
754-789	LIME	1212	GAS TEST - NO GAS	1513	GAS TEST - SAME
789-816	SHALE	1219-1221	LIME (V-LIME)	1513	TD
816-832	LMY SHALE	1221-1223	SHALE		
832-841	LIME	1223-1224	COAL (CROWBERG)		
841-866	SHALE	1224-1262	SHALE		
866-872	LIME	1262-1263	COAL (MINERAL)		
872-891	SAND	1263-1281	SHALE		
891-913	SHALE	1281-1285	SANDY SHALE		
913-930	LIME	1285-1287	SAND /LITE ODOR		
930-934	SAND	1287-1297	SANDY SHALE		
934-966	SANDY SHALE	1288	GAS TEST - NO GAS		
966-972	SHALE	1297-1302	SHALE		
972-980	SAND	1302-1312	SAND / LITE ODOR		
980-995	SANDY SHALE	1312-1320	SHALE		
995-1031	SHALE	1320-1327	SAND		

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 23, 2011

Victor H Dyal  
Layne Energy Operating, LLC  
P O Box 160  
Sycamore, KS 67363

Re: ACO1  
API 15-125-32105-00-00  
Westfall 14G-1  
SW/4 Sec.01-31S-13E  
Montgomery 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,  
Victor H Dyal