



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: _____



1070676

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 (Specify) _____ <i>(Submit ACO-4)</i>	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
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<http://kcc.ks.gov/>

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

Sam Brownback, Governor

January 09, 2012

Tom Denning
TDI, Inc.
1310 BISON RD
HAYS, KS 67601-9696

Re: ACO1
API 15-051-26174-00-00
Engel 1
SE/4 Sec.21-15S-18W
Ellis 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,
Tom Denning



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TDI, Inc.
1310 Bison Rd.
Hays, Ks 67601
ATTN: Herb Dienes

Engel #1
21/15S/18W-ELLIS
Job Ticket: 45244 **DST#: 1**
Test Start: 2011.09.12 @ 02:09:15

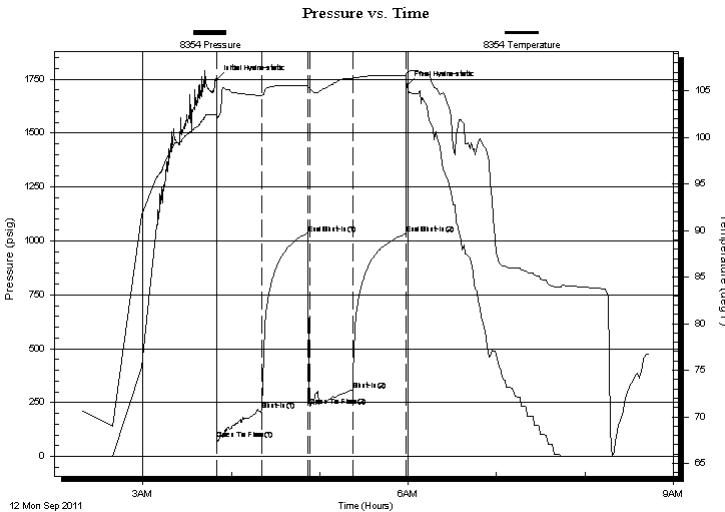
GENERAL INFORMATION:

Formation: **Cong. Sand**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 03:50:25
 Time Test Ended: 08:43:45
 Interval: **3484.00 ft (KB) To 3582.00 ft (KB) (TVD)**
 Total Depth: 3582.00 ft (KB) (TVD)
 Hole Diameter: 7.85 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole
 Tester: Dustin Rash
 Unit No: 38
 Reference Elevations: 1995.00 ft (KB)
 1984.00 ft (CF)
 KB to GR/CF: 11.00 ft

Serial #: 8354 Inside
 Press @ Run Depth: 306.57 psig @ 3554.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.09.12 End Date: 2011.09.12 Last Calib.: 2011.09.12
 Start Time: 02:19:15 End Time: 08:43:45 Time On Btm: 2011.09.12 @ 03:49:55
 Time Off Btm: 2011.09.12 @ 05:59:15

TEST COMMENT: IF-Strong building blow . BOB in 4 minutes 15 seconds.
 ISI-Weak surface return @ 3 minutes. Died @ 1 minute.
 FF-Fair building blow . BOB in 8 minutes.
 FSI-No Return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1746.76	102.46	Initial Hydro-static
1	82.27	102.07	Open To Flow (1)
31	216.81	104.50	Shut-In(1)
63	1034.82	105.56	End Shut-In(1)
64	233.77	105.21	Open To Flow (2)
93	306.57	106.35	Shut-In(2)
129	1031.72	106.66	End Shut-In(2)
130	1721.56	106.93	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
62.00	90%Oil/10%Mud	0.87
186.00	60%Oil/30%Gas/10%Mud	2.61
186.00	60%Mud/20%Oil/20%Gas	2.61
221.00	90%Mud10%Oil	3.10

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

TDI, Inc.
1310 Bison Rd.
Hays, Ks 67601
ATTN: Herb Dienes

Engel #1
21/15S/18W-ELLIS
Job Ticket: 45244 **DST#: 1**
Test Start: 2011.09.12 @ 02:09:15

Mud and Cushion Information

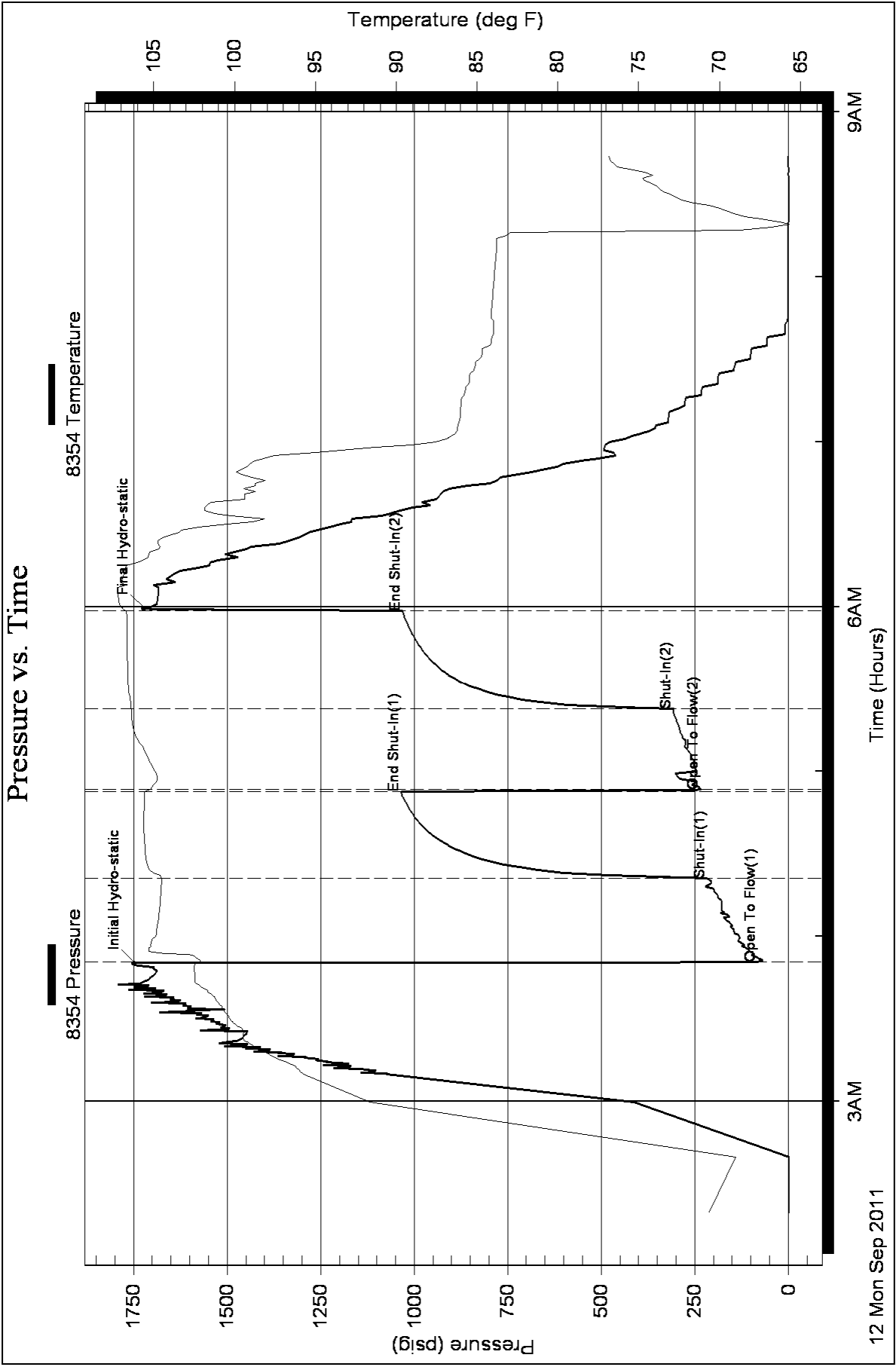
Mud Type: Gel Chem	Cushion Type:	Oil API: 29 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: ppm
Viscosity: 48.00 sec/qt	Cushion Volume: bbl	
Water Loss: 6.80 in ³	Gas Cushion Type:	
Resistivity: ohm.m	Gas Cushion Pressure: psig	
Salinity: 3100.00 ppm		
Filter Cake: inches		

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
62.00	90%Oil/10%Mud	0.870
186.00	60%Oil/30%Gas/10%Mud	2.609
186.00	60%Mud/20%Oil/20%Gas	2.609
221.00	90%Mud10%Oil	3.100

Total Length: 655.00 ft Total Volume: 9.188 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:



HERB DEINES
CONSULTING GEOLOGIST
 108 W. 35th ST.
 PH. 788-625-3380
 HAYS, KS 67601

COMPANY IDI Inc.
 WELL Name / #
 FIELD Shawnee
 COUNTY Ellis STATE Kansas
 LOCATION: 280' ESH & 1540' FELN SE 1/4
 Elevation: KB 1988'
 DF 1988'
 sec 21 Twp 15 R0E 18W
 GL 1988'

Logging by:
 Log Tach
 Log #
 1. Direct Fluid/Flow Log
 2. Direct Com. Permeability Log
 3. Direct Com. Resistivity Log
 4. _____
 5. _____
 6. _____

Contractor Geohydro. Lab. Inc. Rts # 1
 Completed 9-13-2011
 R/TD 3650
 Surface casing 8 3/8" set to 1127' w. 3 7/8" sec 50 D - Didakwuite

Production casing 5 1/2"
 Drilling Time 2700' - A/TD
 Samples 2950' - A/TD

Daily Penetration Rate		
Date	Depth	Activity
9-06-11	390'	Mud set SP
9-07-11	790'	UDC Kickoff Day
9-08-11	1190'	UDC Kickoff Day
9-09-11	2125'	Day
9-10-11	2820'	Day
9-11-11	3400'	Day
9-12-11	3652'	Dist. Log
9-13-11	3650'	Run Csg. RD

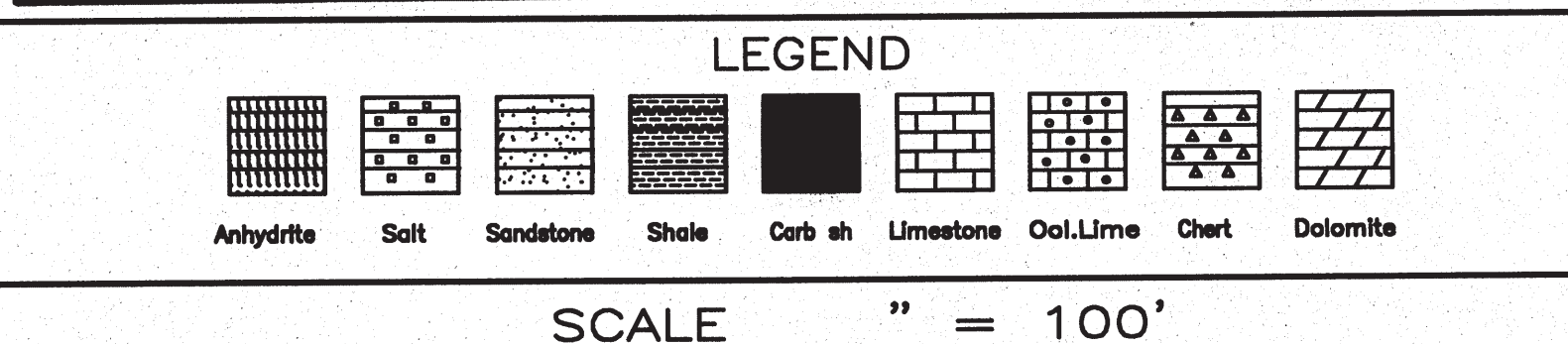
REMARKS Recommended To Ann production casing based on positive results of DST #1.

Herb Deines

Bit Record						
Make & Type	Serial No.	Nozzles	Depth In	Depth Out	Hours	

Formation	Sample	Log	Datum	*	Formation	Sample	Log	Datum	*
Anhydrite Top	1143	1143	+ 855						
Anhydrite Base	1180	1177	+ 821						
Tecela	2941	2938	- 940						
Hecker Shale	3225	3221	- 1223						
Tecela	3245	3241	- 1243						
LRG	3271	3270	- 1272						
BKC	3499	3496	- 1498						
Coalingwater Sand	3577	3574	- 1576						
Arbuckle		3621	- 1623						
RTD		3650	- 1652						
LTID									

* Structural Position to:



Lithology	Drilling time in minutes	DEPTH	Sample Description	Remarks, drill stem tests, etc.
				Mud System- Gel Chemical
				Mud Co
				Slope Survey 1149' 1°
		20		
		30		
		40		
		50		
		60		
		70		
		80		
		90		
		100		
		110		
		120		
		130		
		140		
		150		
		160		
		170		
		180		
		190		
		200		
		210		
		220		
		230		
		240		
		250		
		260		
		270		
		280		
		290		
		300		
		310		
		320		
		330		
		340		
		350		
		360		
		370		
		380		
		390		
		400		
		410		
		420		
		430		
		440		
		450		
		460		
		470		
		480		
		490		
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		1020		
		1030		
		1040		
		1050		
		1060		
		1070		
		1080		
		1090		
		1100		
		1110		
		1120		
		1130		
		1140		
		1150		
		1160		
		1170		
		1180		
		1190		
		1200		

DST #1 3481' - 3582'
 30 - 30-30-30
 Rec: 121' 80cm, 10% O, 90% m
 186' 01cm, 20% G, 20% O, 60% m
 186' 01cm, 30% G, 60% O, 10% m
 G: 100 - 90% O, 10% m
 Gravity 29
 BHT: 107°
 ISIP: 1035 #
 FSI: 1032 #
 FP: 82-217, 234-307
 1st Blow-Strong BOB 4min 15sec
 2nd Blow-Fair BOB 8min
 No blow back

Slope Survey 3650' 1/2°

JOB LOG

SWIFT Services, Inc.

DATE 09-07-11 PAGE NO. 1

CUSTOMER TD, I WELL NO. 1 LEASE ENGEL JOB TYPE DEEP SURFACE TICKET NO. 22273

CHART NO.	TIME	RATE (BPM)	VOLUME (BB) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1500							ONLOCATION
								375 SLS SMD 1/4" FLUCEL
								12 1/4 @ 11.9,
								8 3/8 @ 11.7 @ 11.7. SJ 38.50, INJECT 1109
								CMT 113.12
								2 JOINT OUT
	1745							START C50 FLUATE
								HOOUP
	1930							BREAK CIRC W/RIG
	1950	6.0	12.0	-		350		500 GALS MUD FLUSH
			0	-		350		START CMT 75 SLS @ 11.7 "/SM
			35.5	-		5		150 SLS @ 12.5 "/SM
			93.0	-		300		100 SLS @ 13.0 "/SM
			127.0	-		5		50 SLS @ 14.5 "/SM
			142.0	-		300		END CMT 375 SLS
								RELEASE 8 3/8 PLUG
	2020	6.7	0	-		150		START DISP
			25.0	-		250		- CIRC CMT TO PIT! -
			35.0	-		300		<u>80 SLS</u>
			50.0	-		400		
			60.0	-		450		
	2050	5.5	70.7	-		600		LAND PLUG
								CLOSE IN
								WASHUP
	2100							JOB COMPLETE
								THANK YOU!
								DAVE, JOSAB, LANE

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



Phone: 316-337-6200
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January 10, 2012

Tom Denning
TDI, Inc.
1310 BISON RD
HAYS, KS 67601-9696

Re: ACO-1
API 15-051-26174-00-00
Engel 1
SE/4 Sec.21-15S-18W
Ellis County, Kansas

Dear Tom Denning:

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 09/06/2011 and the ACO-1 was received on January 10, 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