



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1072645  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

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
- Plug Back       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1072645

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to [kcc-well-logs@kcc.ks.gov](mailto:kcc-well-logs@kcc.ks.gov). Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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  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				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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

<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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 33289

LOCATION Eureka

FOREMAN Rick Ledford

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT**

API# 15-125-32141

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/26/11	4758	Shultz 4N-2 W1W	31	14	2	MO
CUSTOMER <u>Layne Energy</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>P.O. Box 1100</u>			<u>520</u>	<u>John</u>		
CITY <u>Syramore</u>			<u>515</u>	<u>Calin</u>		
STATE <u>KS</u>	ZIP CODE <u>67367</u>					

JOB TYPE L/S 0 HOLE SIZE 6 3/4" HOLE DEPTH 1227' CASING SIZE & WEIGHT 4 1/2"  
 CASING DEPTH 1229' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.4# SLURRY VOL 42 Bbl WATER gal/sk 8.0 CEMENT LEFT IN CASING 0'  
 DISPLACEMENT 20.3 Bbls DISPLACEMENT PSI 700 ~~PSI~~ 1100 Bump plus RATE \_\_\_\_\_

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Break circulation w/ 27 Bbl fresh water. Pump 10 sks gel-flush w/ hulls, 5 Bbl water spacer, 20 Bbl caustic soda pic-flush, 10 Bbl dye water. Mixed 135 sks thickset cement w/ 8" Kal-sol /sk, 1/8" phenasol /sk + 14% CFE-115 @ 13.4 #/gal. Washout pump + lines, shut down, release latch down plug. Displace w/ 20.3 Bbl fresh water. Final pump pressure 700 PSI. Bump plug to 1100 PSI. Wait 2 minutes, release pressure, float + plug held. Good cement returns to surface = 8 Bbl slurry to pit. 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	9.00	160.00
1126A	135 sks	thickset cement	18.30	2470.50
1109A	1080 #	8" Kal-sol /sk	.44	475.20
1107A	17 #	1/8" phenasol /sk	1.22	20.74
1135A	34 #	14% CFE-115	9.95	338.30
1118B	500 #	gel-flush	.20	100.00
1105	50 #	hulls	.42	21.00
1103	100 #	caustic soda	1.52	152.00
5407A	7.43	ton mileage bulk trk	1.26	374.47
4453	1	4 1/2" latch down plug	155.00	155.00
4156	1	4 1/2" flopper type float shoe	175.00	175.00
		subtotal		5417.21
		SALES TAX		246.80
		ESTIMATED TOTAL		5663.41

Ravin 3737

AUTHORIZATION [Signature]

TITLE PF

DATE 10/26/11

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>10/20/2011</b>
Date Completed	<b>10/25/2011</b>

Well No.	Operator	Lease	A.P.I #	County	State
<b>4N-2-WIW</b>	<b>Layne Energy Operating</b>	<b>Shultz</b>	<b>15-125-32141-00-00</b>	<b>Montgomery</b>	<b>Kansas</b>

1/4	1/4	1/4	Sec.	Twp.	Rge.
			<b>2</b>	<b>31</b>	<b>14 E</b>

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
<b>Brantley</b>		<b>4</b>	<b>21.8' 8 5/8</b>	<b>1287</b>	<b>6 3/4</b>

### Formation Record

0-4	DIRT	801-887	SHALE	1180-1187	SAND / NO ODOR
4-80	LIME	887-888	COAL (MULBERRY)	1187-1200	BROWN SAND /LT ODOR
80-308	SHALE	888-892	SHALE	1200-1206	SANDY SHALE
308-420	SAND / DAMP	892-918	LIME (PAWNEE)	1206-1209	COAL
361	WENT TO WATER	918-921	BLACK SHALE	1209-1287	SANDY SHALE
420-423	SANDY SHALE	921-925	LIME	1287	TD
423-429	LIME	925-932	BLK SHALE (LEXINGTON)		
429-441	SHALE	932-952	SANDY SHALE		
441-472	LIME	952-957	SAND		
472-477	SHALE	957-976	SANDY SHALE		
477-567	LIME	976-1005	LIME (OSWEGO)		
567-576	SAND	1005-1014	BLK SHALE (SUMMIT)		
576-590	SANDY SHALE	1014-1019	LIME		
590-600	SAND	1019-1024	BLK SHALE (EXCELLO)		
600-622	LIME	1024-1025	COAL (MULKY)		
622-628	SANDY SHALE	1025-1030	LIME		
628-658	LIME	1030-1032	SHALE		
658-671	SHALE	1032-1042	SANDY SHALE		
671-680	BLACK SHALE	1042-1071	SHALE		
680-687	LMY SHALE	1071-1073	COAL		
687-694	LIME	1073-1087	SHALE		
694-699	SHALE	1087-1090	LIME		
699-733	LIME	1090-1092	SHALE		
733-738	SAND	1092-1093	COAL (CROWBERG)		
738-750	SANDY SHALE	1093-1100	SHALE		
750-756	SHALE	1100-1110	SAND		
756-771	LIME	1110-1134	SHALE		
771-774	BLACK SHALE	1134-1136	COAL		
774-779	SHALE	1136-1166	SHALE		
779-801	SAND	1166-1180	SANDY SHALE		

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

January 24, 2012

Victor H Dyal  
Layne Energy Operating, LLC  
PO BOX 160  
SYCAMORE, KS 67363

Re: ACO1  
API 15-125-32141-00-00  
Shultz 4N-2 WIW  
NW/4 Sec.02-31S-14E  
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