



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1076840
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
-----------------------------------	-----------------	---

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: _____

1076840

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. 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
--	---

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
----------------	-------	---------	------------	---

Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
---	--

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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> _____	PRODUCTION INTERVAL: _____ _____
--	--	---

Form	ACO1 - Well Completion
Operator	Comanche Resources Company
Well Name	EDER 5-1
Doc ID	1076840

All Electric Logs Run

DENSITY,NEUTRON & MICRO LOG
ARRAY INDUCTION
CALIPER LOG
SONIC

15-171-20857

Sean Deenihan

Petroleum Geologist

15-171-20857

GEOLOGIST'S REPORT DRILLING TIME AND SAMPLE LOG

COMPANY Comanche Resources Company
 LEASE Eder #5-1
 FIELD _____
 LOCATION 1140' FNL & 1130' FWL
 SEC 5 TWSP 20S RGE 34W
 COUNTY Scott STATE Kansas
 CONTRACTOR Murfin Rig #22
 SPUD 9/24/2011 COMP 1-16-2011
 RTD 5625' LTD 5627'
 MUD UP 3200' TYPE MUD Chemical

ELEVATIONS

KB 3057'

DF _____

GL 3046'

Measurements Are All From Kelly Bushing

CASING

CONDUCTOR _____
 SURFACE 8-5/8" @394'
 PRODUCTION 5.5" @ ?'

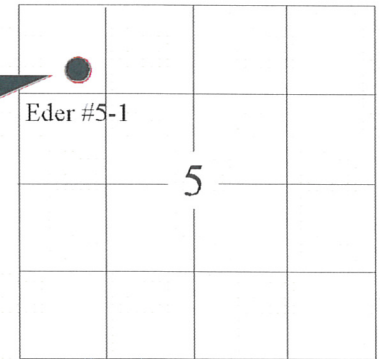
SAMPLES SAVED FROM 3920' TO RTD
 DRILLING TIME KEPT FROM 3920' TO RTD
 SAMPLES EXAMINED FROM 3920' TO RTD
 GEOLOGICAL SUPERVISION FROM 3900'
 REFERENCE WELL Eder #6-1

ELECTRICAL SURVEYS

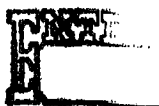
CND, DIL,
MICRO, Sonic, "Imager"
Weatherford

Formation	Sample Tops	E-log Tops	Struct Pos.
Heebner Sh.	3914 (-853)		
Lansing	3964 (-907)		
Stark Sh.	4268 (-1211)		
Pawnee	4470 (-1413)		
Myric Station	4512 (-1455)		
Cherokee Sh.	4572 (-1515)		
Morrow Sh.	4758 (-1701)		
Miss	4824 (-1767)		

Log Confidential



REMARKS The Eder #6-4 will be evaluated further through 5.5" production casing



TICKET NUMBER 33770
 LOCATION Oakley
 FOREMAN Kelly Gabel

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
1-6-12	2125	Eder 5-1	5	20	34	Scott
CUSTOMER Comanche Res.			Shallow water w/o Dead end 15 w into			
MAILING ADDRESS 6520 N Western Ave			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Oklahoma City			5399	Miles S		
STATE OK			52845127	Damon M		
ZIP CODE 73116			566	Cory D		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 390 CASING SIZE & WEIGHT 8 5/8 24#
 CASING DEPTH 390 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 148 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 42'
 DISPLACEMENT 22 bbl DISPLACEMENT PSI _____ MIX PSI 200# RATE 4 bbl/min

REMARKS: safety Meeting, rigged up on Murtindrillin Rig # 22, Hooked up to circulate. Mixed 220sk com 390 CC, 290 gel & 1/4# per sk Flo-seal. Shut down, released Plug & displaced with 22 bbl water, shut in, washed out pumps & lines, Rigged down & left location

Cement did circulate
APPROX 5 bbl to pit

*Thank You
Kelly & crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1085.00	1085.00
5406	415 mi	MILEAGE	5.00	225.00
11045	270	C1955 A Cement	17.65	4765.50
5407A	12.7	Ton Mileage delivery	74.167	954.25
1102	761#	Calcium chloride	.89	677.39
1118B	508	Bentonite	.25	127.00
1107	67#	Flo-Seal	2.83	189.91
4432	1	8 5/8 Wooden Plug	96.00	96.00
4231	1	8 5/8 Fiber Baffle Plate	138.00	138.00
41132	2	8 5/8 Centralizer	82.00	164.00
				8421.18
				842.12
				7579.06
		247236	SALES TAX	459.91
			ESTIMATED TOTAL	8038.97

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE 1-6-12

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



TICKET NUMBER 33817
LOCATION Oakley
FOREMAN Fuzzly

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

FIELD TICKET & TREATMENT REPORT
CEMENT

Rs

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-17-12	2125	Eder S-1	5	20s	34w	Scott
CUSTOMER <u>Comanche Resources</u>			shallow water low dead end 25 w/s in			
MAILING ADDRESS						
CITY			STATE	ZIP CODE		
TRUCK #		DRIVER		TRUCK #		DRIVER
399		Pully G				
566		Cody R				
528		Damon W				

JOB TYPE 2 stage HOLE SIZE 7 7/8 HOLE DEPTH 5625 CASING SIZE & WEIGHT 5 1/2 15.5 - 5 1/2 + 17 #
 CASING DEPTH 4748 DRILL PIPE _____ TUBING _____ OTHER DU Tool @ 2341
 SLURRY WEIGHT 13.8-12.5 SLURRY VOL 1.42 - 1.9 WATER gal/sk 7-10.8 CEMENT LEFT in CASING 42'
 DISPLACEMENT 114.23 DISPLACEMENT PSI 1 3/4 Top Case MIX PSI _____ RATE 60 bbl/min Top Case

REMARKS: Safety meeting on Munkin #22. Rise up & circulate. Pump 5 BBL water 500 gal mud flush, 5 BBL water. Mix 170sk class 'H', 10% cal seal 10% salt, 6% FH-115, 5% Cal-seal. Wash pump and lines. Drop plug and displace 113 1/4 BBL (60 water 53 1/4 mud) lift press 500' land @ 1400'. Close hold Drop DU Bomb wait 15 min open tool @ 200' circ. 4 hrs. Pump 5 BBL water mix 30sk RH, 20sk MH, mix 630sk 60/40 pos 8% cal 1% sls seal down 8 1/2 csg. Wash pump and lines (close tubing with 150sk 90sg). Drop plug and displace 55 1/2 BBL shut down @ 30' for 10 min. Pump 25 1/2 BBL lift 250' close tool @ 1250' cement did not circulate. wait 8 hrs on temp survey released @ 8:00pm

Thanks Fuzzly & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3020.00	3020.00
5406	45 miles	MILEAGE	5.00	225.00
5407A	37.23 Ton	Tow Mileage Delivery	1.67	2797.83
1115A	1705RS	CLASS 'H' cement	19.30	3281.00
1111	813#	SALT	.45	365.85
1101	1598#	Cal-Seal	.49	783.02
1135A	96#	FH-115	10.85	1041.60
1131	680SKS	60/40 pos	15.10	10268.00
1118B	4678#	Bentonite (Gel)	.25	1169.50
1107	170#	Sl-sal	2.87	479.40
1144G	500gal	Mud Flush	1.00	500.00
		subtotal		23902.40
		less 1090		23902.40
		subtotal		21512.16
		SALES TAX		1334.11
		ESTIMATED TOTAL		22846.27

247237

Revin 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.



DRILL STEM TEST REPORT

Prepared For: **Comanche Resources Co.**

6520 N Western AVE STE 300
Oklahoma City OK 73116

ATTN: Sean Deenihan / Jim

Eder # 5-1

5-20s-34w Scott, KS

Start Date: 2012.01.11 @ 01:36:00

End Date: 2012.01.11 @ 10:31:45

Job Ticket #: 44987 DST #: 1

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2012.01.17 @ 16:52:01



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Comanche Resources Co.
6520 N Western AVE STE 300
Oklahoma City OK 73116
ATTN: Sean Deenihan / Jim

5-20s-34w Scott, KS
Eder # 5-1
Job Ticket: 44987 **DST#: 1**
Test Start: 2012.01.11 @ 01:36:00

Tool Information

Drill Pipe:	Length: 4228.00 ft	Diameter: 3.80 inches	Volume: 59.31 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 24000.00 lb
Drill Collar:	Length: 238.00 ft	Diameter: 2.25 inches	Volume: 1.17 bbl	Weight to Pull Loose: 6000.00 lb
			<u>Total Volume: 60.48 bbl</u>	Tool Chased ft
Drill Pipe Above KB:	4.00 ft			String Weight: Initial 56000.00 lb
Depth to Top Packer:	4490.00 ft			Final 56000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	64.00 ft			
Tool Length:	92.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
-------------------------	--------------------	-------------------	-----------------	-------------------	-----------------------

Change Over Sub	1.00			4463.00	
Shut In Tool	5.00			4468.00	
Hydraulic tool	5.00			4473.00	
Jars	5.00			4478.00	
Safety Joint	3.00			4481.00	
Packer	5.00			4486.00	28.00 Bottom Of Top Packer
Packer	4.00			4490.00	
Stubb	1.00			4491.00	
Recorder	0.00	8358	Inside	4491.00	
Recorder	0.00	6668	Outside	4491.00	
Perforations	25.00			4516.00	
Change Over Sub	1.00			4517.00	
Drill Pipe	31.00			4548.00	
Change Over Sub	1.00			4549.00	
Bullnose	5.00			4554.00	64.00 Bottom Packers & Anchor

Total Tool Length: 92.00



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Comanche Resources Co.

5-20s-34w Scott, KS

6520 N Western AVE STE 300
Oklahoma City OK 73116

Eder # 5-1

Job Ticket: 44987

DST#: 1

ATTN: Sean Deenihan / Jim

Test Start: 2012.01.11 @ 01:36:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 55.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.94 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 5500.00 ppm

Filter Cake: 2.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
30.00	GOCM 5%g 30%oil 65%m	0.148
60.00	GOCM 5%g 25%oil 70%m	0.295
60.00	GOCM 20%g 20%oil 60%m	0.295
60.00	GOCM 20%g 30%oil 50%oil	0.295
0.00	216' of GIP	0.000

Total Length: 210.00 ft

Total Volume: 1.033 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

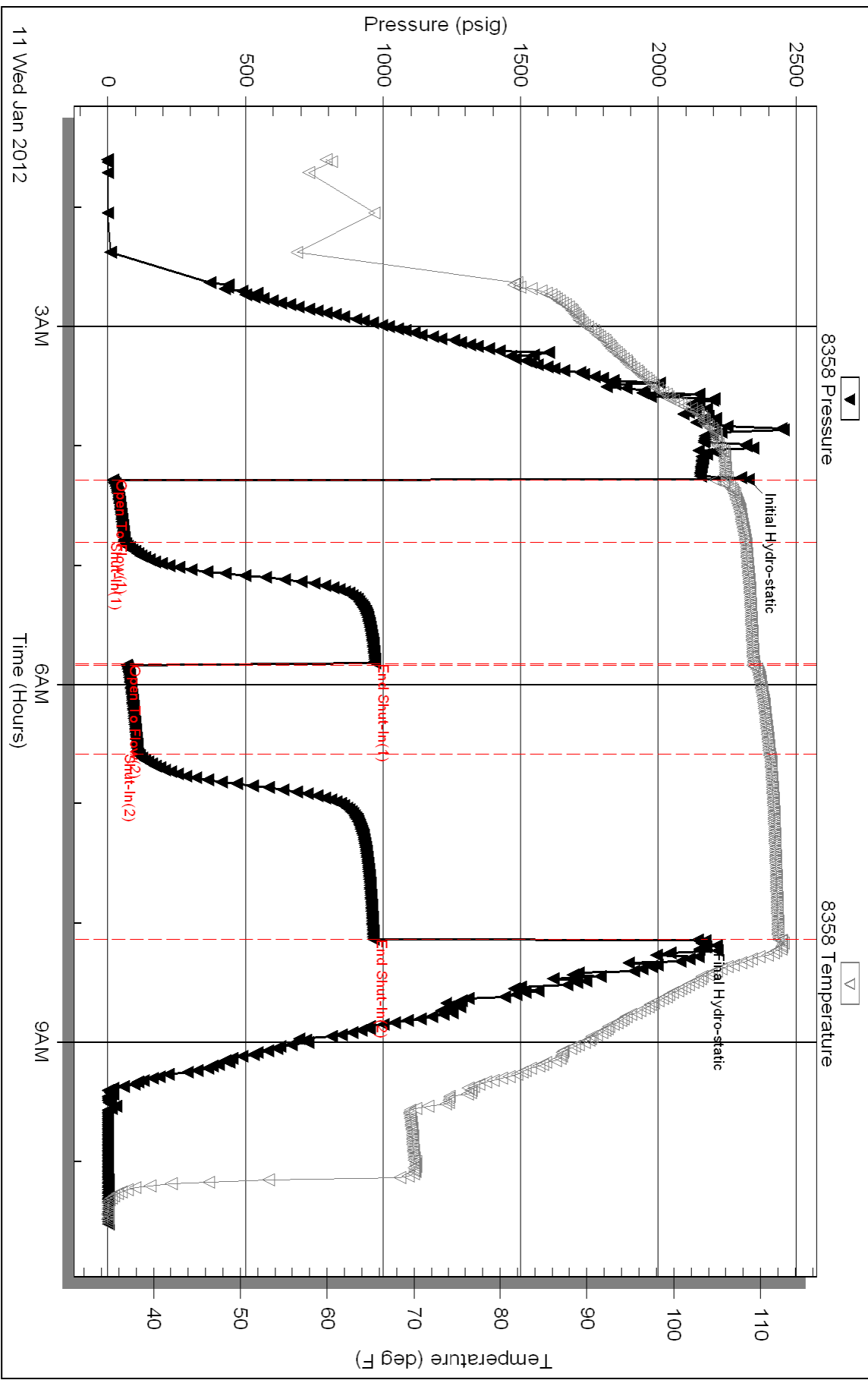
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time



11 Wed Jan 2012

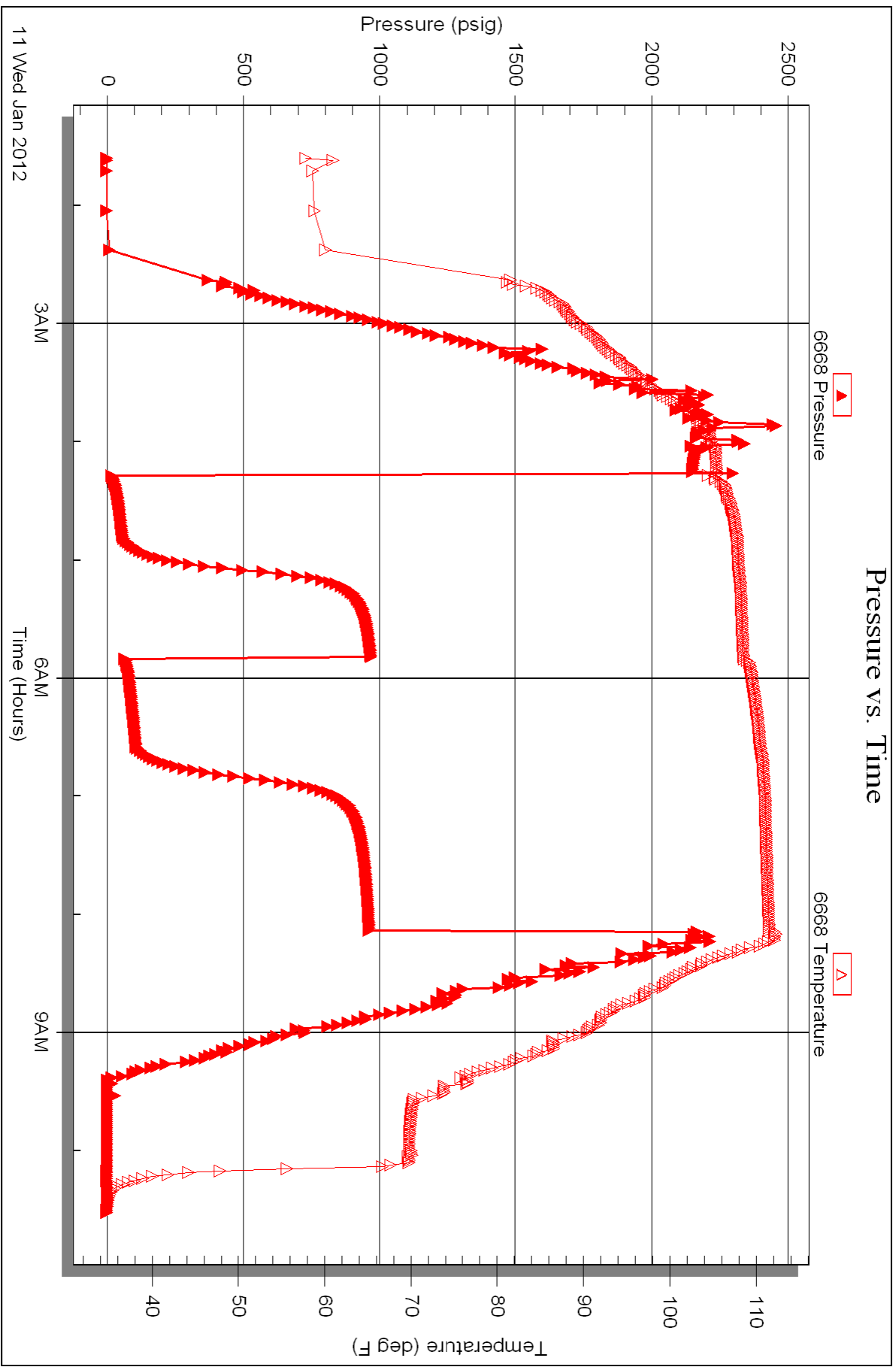
Serial #: 6668

Outside

Comanche Resources Co.

Elder #5-1

DST Test Number: 1





TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

RECEIVED
JAN 13 2012

Test Ticket

NO. 44987

Well Name & No. Eder # 5-1 BY: _____ Test No. DST # 1 Date 1-11-12
 Company Comanche Res Co. Elevation 3075 KB 3064 GL
 Address 6520 N. Western AVE STE 300 Oklahoma City OK 73116
 Co. Rep / Geo. Sean Deekihan / Jim Lemaster Rig Murfin #22
 Location: Sec. 5 Twp. 20s Rge. 34w Co. Scott State KS

Interval Tested 4490-4554 Zone Tested Myric Station / Ft. Scott
 Anchor Length 64 Drill Pipe Run 4228 Mud Wt. 9.2
 Top Packer Depth 4486 Drill Collars Run 238 Vis 55
 Bottom Packer Depth 4490 Wt. Pipe Run 0 WL 8.0
 Total Depth 4554 Chlorides 5500 ppm System LCM 616

Blow Description IF-Weak Surface Blow Built to 4"
ISI-Weak Surface Blow Died in 46 min
FF-Weak Surface Blow Built to 5"
FST-Weak Surface Blow Died in 68 min

Rec	Feet of	%gas	%oil	%water	%mud
<u>60</u>	<u>G-OCM</u>	<u>20</u>	<u>30</u>	<u>50</u>	<u>0</u>
<u>60</u>	<u>G-OCM</u>	<u>20</u>	<u>20</u>	<u>60</u>	<u>0</u>
<u>60</u>	<u>G-OCM</u>	<u>5</u>	<u>25</u>	<u>70</u>	<u>0</u>
<u>30</u>	<u>G-OCM</u>	<u>5</u>	<u>30</u>	<u>65</u>	<u>0</u>
Rec	Feet of <u>216' of G-IP</u>	%gas	%oil	%water	%mud
Rec Total <u>210</u>	BHT <u>103</u>	Gravity	API RW	@	°F Chlorides ppm

(A) Initial Hydrostatic 2328 Test 1225' T-On Location 23:47
 (B) First Initial Flow 18 Jars 250' T-Started 1:36 AM
 (C) First Final Flow 60 Safety Joint 75' T-Open 4:17 AM
 (D) Initial Shut-In 969 Circ Sub N/C T-Pulled 8:08 AM
 (E) Second Initial Flow 67 Hourly Standby 3/4 hr 75' T-Out 10:31 AM
 (F) Second Final Flow 108 Mileage 42 R/T 58.80 Comments 1112 18:30
 (G) Final Shut-In 963 Sampler _____
 (H) Final Hydrostatic 2141 Straddle _____ Ruined Shale Packer _____
 Shale Packer _____ Ruined Packer _____
 Extra Packer _____ Extra Copies _____
 Extra Recorder _____

Initial Open 30
 Initial Shut-In 60
 Final Flow 45
 Final Shut-In 90
 Day Standby 32 hrs
 Accessibility _____
 Sub Total 11683.80
 Sub Total 800
 Total 2483.80
 MP/DST Disc't _____

Approved By Jim Lemaster Our Representative Will Neal

Trilobite Testing Inc. shall not be liable for damaged of any kind of 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 statements or opinion concerning the results 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.

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

March 21, 2012

CARRIE RENNER
Comanche Resources Company
6520 N WESTERN AVE STE 300
OKLAHOMA CITY, OK 73116-7334

Re: ACO1
API 15-171-20848-00-00
EDER 5-1
NW/4 Sec.05-20S-34W
Scott 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,
CARRIE RENNER