

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1078191

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 #		API No. 15
Name:		Spot Description:
Address 1:		
		Feet from North / South Line of Section
City: St	ate: Zip:+	Feet from Cast / West Line of Section
	·	Footages Calculated from Nearest Outside Section Corner:
Phone: ( )		
		County:
		Lease Name: Well #:
		Field Name:
-		
		Producing Formation:
Designate Type of Completion:		Elevation: Ground: Kelly Bushing:
New Well Re-	-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW	SWD SIOW	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A	ENHR SIGW	Multiple Stage Cementing Collar Used?
OG	GSW Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)		If Alternate II completion, cement circulated from:
Cathodic Other (Core	e, Expl., etc.):	feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Inf	fo as follows:	
Operator:		Drilling Fluid Management Plan
Well Name:		Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:	Original Total Depth:	
Deepening Re-perf.		Chloride content: ppm Fluid volume: bbls
	Conv. to GSW	Dewatering method used:
Plug Back:	Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled	Permit #:	Operator Name:
Dual Completion	Permit #:	
SWD	Permit #:	Lease Name: License #:
ENHR	Permit #:	Quarter Sec TwpS. R East West
GSW	Permit #:	County: Permit #:
Spud Date or Date Rea Recompletion Date	ached TD Completion Date or Recompletion Date	

### 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						
Confidential Release Date:						
Wireline Log Received Geologist Report Received						
UIC Distribution						
ALT I II III Approved by: Date:						

	side Two				
Operator Name:	Lease Name:	Well #:			
Sec TwpS. R East _ West	County:				

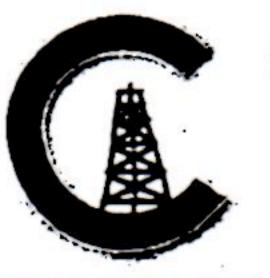
**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, 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 (Attach Additional Sheets)		Yes No		-	n (Top), Depth an		Sample	
Samples Sent to Geolog	gical Survey	Yes No	Nam	Name Top		Top Datum		
Cores Taken Electric Log Run Electric Log Submitted Electronically <i>(If no, Submit Copy)</i> List All E. Logs Run:		☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No						
		CASING		ew Used				
		Report all strings set-	conductor, surface, inte	ermediate, product	ion, 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: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
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 (Amount and Kind of Material Used)			Depth			
TUBING RECORD:	Si	ze:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed Production, SWD or ENH			۶.	Producing N	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
			1							
DISPOSITION OF GAS:				METHOD	OF COMPLE	LETION: PRODUCTION INTERVAL			RVAL:	
Vented Sold		Used on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Sub	mit ACC	)-18.)		Other (Specify)						



# Consolidated

Qil Well Services, LLC

34225 **TICKET NUMBER** LOCATION KS ama FOREMAN Fred Mad

## FIELD TICKET & TREATMENT REPORT

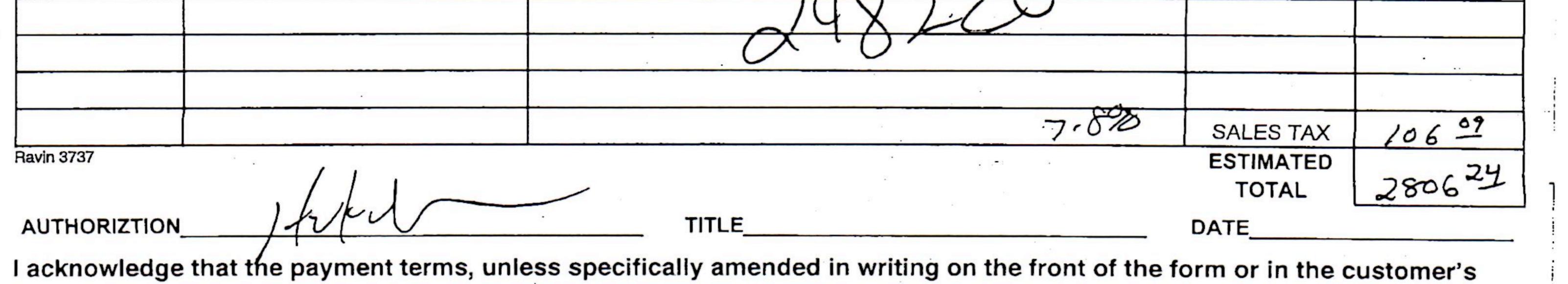
CEMENT

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

DATE	CUSTOMER #	WELL NAME & NUMB	ER	SECTION	TOWNSHIP	RANGE	COUNTY
3/2/12	7806	Teter # 14-7	-	E12 14	20	20	AN
CUSTOMER							
Tai	lwater -	Inc		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDR	ESS			506	FREMAD	Safety	nous
640	1 Avondo	le Dr		368	GARMOO	Gm	d
CITY	62	STATE ZIP CODE		369	DERMAS	DM	•
Oklahon	no City	OK 73116		548	MIKHAA	M /4	

CASING SIZE & WEIGHT 21/8 EUE HOLE SIZE 518 JOB TYPE Longstrin HOLE DEPTH 794 DRILL PIPE TUBING CASING DEPTH OTHER CEMENT LEFT in CASING 25" Pluc WATER gal/sk\_ SLURRY VOL SLURRY WEIGHT 4.56BDISPLACEMENT PSI RATE 4BPM DISPLACEMENT MIX PSI REMARKS: Establish Dump rate. Mix+ Pump 100 Prominulel Flush. 50/50 Por Mix 62 SKS uno Flush clean. Displace 212' Rubber + lines Dump 50 to 700 # PSI. Ralease pressure to Pressure as LUG Shutin duc. Casily .... Evans Energy Dev. Tuc 4 ACCOUNT QUANITY or UNITS DESCRIPTION of SERVICES or PRODUCT UNIT PRICE TOTAL CODE

5401	1	PUMP CHARGE	368		103000
5406	~	MILEAGE			NIC
5402	584	Casin Footage			NIC
5407	1/2 Minim	-Ton miles	548		17500
55020	12hr	80 BBL Vac Truck	369		13500
			1*		
	• •				
1124	1165K	50/50 Por mix Cement	-		127030
1118B	295#	Primium all			6195
4402	· / · ·	21/2" Rubber Plug	· · ·		28-00
		Å			
-				84 14	
		740770	25		



account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form