



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1079239  
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: \_\_\_\_\_

1079239

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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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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

July 23, 2012

Randall L. Trimble  
Trimble & Maclaskey Oil LLC  
110 SOUTH ST  
PO BOX 171  
GRIDLEY, KS 66852

Re: ACO1  
API 15-111-20446-00-00  
Francis Redeker 1  
SE/4 Sec.13-21S-10E  
Lyon 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,  
Randall L. Trimble



**CONSOLIDATED**  
Oil Well Services, LLC



**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

**MAIN OFFICE**  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

INVOICE

Invoice # 248843

Invoice Date: 04/09/2012 Terms:

Page 1

TRIMBLE & MACLASKEY OIL LLC  
BOX 171  
GRIDLEY KS 66852  
( ) -

FRANCIS REDEKER #1  
36397  
13-21S-10E  
04-04-12  
KS

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	140.00	19.2000	2688.00
1110A	KOL SEAL (50# BAG)	700.00	.4600	322.00
1107A	PHENOSEAL (M) 40# BAG)	140.00	1.2900	180.60
1131	60/40 POZ MIX	260.00	12.5500	3263.00
1118B	PREMIUM GEL / BENTONITE	1790.00	.2100	375.90
1107A	PHENOSEAL (M) 40# BAG)	260.00	1.2900	335.40
1123	CITY WATER	3000.00	.0165	49.50
4104	CEMENT BASKET 5 1/2"	2.00	229.0000	458.00
4130	CENTRALIZER 5 1/2"	4.00	48.0000	192.00
4253	TYPE A PACKER SHOE 6 1/2 X 6	1.00	1584.0000	1584.00
4277	DV TOOL SIZE 5 1/2" (STA	1.00	3220.0000	3220.00
4306	THREAD LOCK KIT	1.00	25.0000	25.00
4310	5 1/2" STOP RING	1.00	30.0000	30.00

Description	Hours	Unit Price	Total
515 TON MILEAGE DELIVERY	283.20	1.34	379.49
520 CEMENT PUMP	1.00	1030.00	1030.00
520 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
520 CEMENT PUMP	1.00	1030.00	1030.00
611 TON MILEAGE DELIVERY	283.20	1.34	379.49
637 80 BBL VACUUM TRUCK (CEMENT)	4.00	90.00	360.00

Parts: 12723.40 Freight: .00 Tax: 928.80 AR 16951.18  
 Labor: .00 Misc: .00 Total: 16951.18  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4914



ENTERED

TICKET NUMBER 36397  
 LOCATION Eureka  
 FOREMAN Rick Ledford

FIELD TICKET & TREATMENT REPORT

PO Box 884, Chanute, KS 66720  
 820-431-9210 or 800-467-8676

CEMENT API # 15-111-20446

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/4/12	7842	Francis Rederer #1	13	215	10E	Lyao
CUSTOMER Trimble + McCloskey Oil LLC			Gulch Orig			
MAILING ADDRESS P.O. Box 171			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Gridley			520	John		
STATE KS			611	Joey		
ZIP CODE 66652			515	Celia		
			637	Jim		

JOB TYPE L/S 0 HOLE SIZE 7 7/8" HOLE DEPTH 2842' RA CASING SIZE & WEIGHT 5 1/2" 15.5# NEW  
 CASING DEPTH 2610' G.L. DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER P.V. tool @ 1599.6 G.L.  
 SLURRY WEIGHT 136# - 12.8# SLURRY VOL 47, 80 bbl WATER gal/sk 9.0 - 8.0 CEMENT LEFT in CASING 42.09  
 DISPLACEMENT 61 bbl, 38.4 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

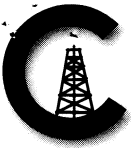
REMARKS: Safety meeting - Rig up to 5 1/2" casing. Packer shoe @ 2610' G.L. Set packer shoe @ 950 PSI. Stage #1  
Pump 15 bbl ahead. Mixed 140 sacks thickset cement w/ 5" Kal-seal/sk + 1" phenaseal/sk @ 136#/gal. yield 1.75. Washout  
pump + hrs, release flex plug. Displace w/ 61 bbl water. Final pump pressure 900 PSI. Pump flex plug to 1300 PSI.  
release pressure, float + plug hold. Drop top bomb. Open stage collar @ 1100 PSI. Circulated 10 bbl cement to  
pit w/ mudpump. Circulate 2 1/2 hrs, stage #1 complete. Stage #2 Pump 10 bbl water ahead. Mixed 260 sacks  
600/40 Permox cement w/ 8% gel + 1" phenaseal/sk @ 12.8#/gal. yield 1.70. Washout pump + hrs, release  
closing plug. Displace w/ 38.4 bbl fresh water. Final pump pressure 900 PSI. Close stage collar  
@ 1200 PSI. Pump plug to 1500 PSI. release pressure, float + plug hold. 8 bbl slurry to pit. Job complete. Rig down.  
 "Thank You"

Centralizers on 1, 3, 23, 25 baskets on 2, 23 P.V. tool on top of 24

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	30	MILEAGE	4.00	120.00
5401	1	2nd stage pump charge	1030.00	1030.00
1126A	140 sacks	thickset cement	19.20	2688.00
1108A	700#	5" Kal-seal/sk	.46	322.00
1107A	140#	1" phenaseal/sk	1.29	180.60
1131	260 sacks	600/40 Permox cement	12.55	3263.00
1118B	1790#	8% gel	.21	375.90
1107A	260#	1" phenaseal/sk	1.29	335.40
5407A	18.88	tan mileage bulk trucks	1.34	758.98
5502C	4 hrs	80 bbl UAC-TRK	90.00	360.00
1123	3000 gals	city water	16.50/1000	49.50
4104	2	Cement baskets	229.00	458.00
4130	4	5 1/2" x 7 7/8" centralizers	48.00	192.00
4253	1	5 1/2" x 7 7/8" Type A packer shoe	1584.00	1584.00
4277	1	5 1/2" O.V. tool (stage collar)	3220.00	3220.00
4306	1	Thread lock kit	25.00	25.00
4310	1	5 1/2" Stop ring	30.00	30.00
Subtotal = 16022.38			7.3%	SALES TAX
				ESTIMATED TOTAL
				16951.18

AUTHORIZATION M. J. [Signature] TITLE TR DATE 4-4-12

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

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

**MAIN OFFICE**  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

INVOICE

Invoice # 248748

Invoice Date: 03/31/2012 Terms:

Page 1

TRIMBLE & MACLASKEY OIL LLC  
BOX 171  
GRIDLEY KS 66852  
( ) -

FRANCIS REDEKER #1  
36412  
13-21S-10E  
03-31-12  
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	90.00	14.9500	1345.50
1102	CALCIUM CHLORIDE (50#)	250.00	.7400	185.00
1118B	PREMIUM GEL / BENTONITE	170.00	.2100	35.70
1107	FLO-SEAL (25#)	23.00	2.3500	54.05
Description		Hours	Unit Price	Total
515	MIN. BULK DELIVERY	1.00	350.00	350.00
520	CEMENT PUMP (SURFACE)	1.00	825.00	825.00
520	EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00

Parts:	1620.25	Freight:	.00	Tax:	118.29	AR	3033.54
Labor:	.00	Misc:	.00	Total:	3033.54		
Subt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4914



**CONSOLIDATED**  
Oil Well Services, LLC



TICKET NUMBER 36412

LOCATION EUREKA

FOREMAN Kevin McCoy

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT API #15-111-20446**

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-31-12	7842	FRANCIS REDEKER #1	13	215	10E	LYON
CUSTOMER TRIMBLE & MACLASKEY			Gulick Delv.			
MAILING ADDRESS P.O. Box 171						
CITY Gridley	STATE Ks	ZIP CODE 66852	TRUCK #	DRIVER	TRUCK #	DRIVER
			520	John S.		
			515	Calvin H.		

JOB TYPE SURFACE HOLE SIZE \_\_\_\_\_ HOLE DEPTH 121 KB CASING SIZE & WEIGHT 8 5/8 23 \* New  
 CASING DEPTH 108' G.L. DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 15\* SLURRY VOL 22 BBL WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 15'  
 DISPLACEMENT 6.7 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 8 5/8 Csg. Break Circulation w/ 5 BBL water. Mixed 90 SKS Class "A" Cement w/ 3% CaCl2, 2% Gel, 1/4 \* Flo-Seal /sk @ 15\*/9AL. Displace w/ 6.7 BBL fresh water. Shut casing int. Good Cement Returns to Surface. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 S	1	PUMP CHARGE	825.00	825.00
5406	30	MILEAGE	4.00	120.00
1104 S	90 SKS	Class "A" Cement	14.95	1345.50
1102	250 *	CaCl2 3%	.74	185.00
1118 B	170 *	Gel 2%	.21	35.70
1107	23 *	Flo-Seal 1/4 * /sk	2.35	54.05
5407	4.23 TONS	Ton Mileage Buck Delv.	M/c	350.00
			Sub Total	2915.25
			SALES TAX	118.29
			ESTIMATED TOTAL	3033.54

THANK YOU 24848 7.3%

Revin 3737

AUTHORIZATION MJA

TITLE Tool Pusher

DATE 3-31-12

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.