

### Kansas Corporation Commission Oil & Gas Conservation Division

#### 1080942

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:	SecTwpS. R 🔲 East 🗌 West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	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           Gas         D&A         ENHR         SIGW           OG         GSW         Temp. Abd.           CM (Coal Bed Methane)         Cathodic         Other (Core, Expl., etc.):	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:
If Workover/Re-entry: Old Well Info as follows:	feet depth to:w/sx cmt.
Operator:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:  Deepening Re-perf. Conv. to ENHR Conv. to SWD  Conv. to GSW	Chloride content: ppm Fluid volume: bbls  Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec Twp S. R
☐ ENHR         Permit #:           ☐ GSW         Permit #:	County: Permit #:
Spud Date or Date Reached 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		
Date:		
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 #: \_ 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 Wireline Logs surveyed. Attach final geological well site report. **Drill Stem Tests Taken** Yes No Log Formation (Top), Depth and Datum Sample (Attach Additional Sheets) Name Top Datum Samples Sent to Geological Survey ☐ Yes □ No Cores Taken Yes No Electric Log Run Electric Log Submitted Electronically Yes No (If no, Submit Copy) List All E. Logs Run: CASING RECORD Used New Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight # Sacks Type and Percent Type of Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Additives Depth Cement Used ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth TUBING RECORD: Size: Set At: Packer At: Liner Run: No Yes Producing Method: Date of First, Resumed Production, SWD or ENHR. Pumping Gas Lift Other (Explain) Flowing **Estimated Production** Bbls. Water Bbls. Gas-Oil Ratio Oil Gas Mcf Gravity Per 24 Hours **DISPOSITION OF GAS:** METHOD OF COMPLETION: PRODUCTION INTERVAL: Open Hole Dually Comp. Perf. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)

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 Thomas E. Wright, Commissioner Sam Brownback, Governor

August 28, 2012

Brandon Owens Rockin Bar Nothing Ranch, Inc. 2339 COUNTY RD 2800 INDEPENDENCE, KS 67301-7187

Re: ACO1 API 15-125-32190-00-00 Melander A RBN 10 NW/4 Sec.11-34S-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, Brandon Owens



### **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

ROCKIN BAR NOTHIN RANCH INC 2339 COUNTY ROAD 2800 INDEPENDENCE KS 67301 (620)289-4782 RBN #10 2550000176 04/27/12 KS

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Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	70.00	19.2000	1344.00
1107A	PHENOSEAL (M) 40# BAG)	40.00	1.2900	51.60
1110A	KOL SEAL (50# BAG)	350.00	.4600	161.00
1118B	PREMIUM GEL / BENTONITE	150.00	.2100	31.50
1123	CITY WATER	4000.00	.0165	66.00
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00
Sublet Performed	Description			Total
9999-240	CASH DISCOUNT			-190.13
9999-240	CASH DISCOUNT			-168.21
Description		Hours	Unit Price	Total
492 CEMENT PUMP		1.00	1030.00	1030.00
492 EQUIPMENT MILE	EAGE (ONE WAY)	35.00	4.00	140.00
492 CASING FOOTAGE	•	715.00	.22	157.30
NUNNE WATER TRANSPOR	_	2.00	112.00	224.00
518 MIN. BULK DELI	VERY	1.00	350.00	350.00

Amount Due 3689.36 if paid after 05/30/2012

Parts: Labor: Sublt:	.00	Freight: Misc: Supplies:	.00	Tax: Total: Change:	95.36 3320.42 .00	AR	3320.42
		=======================================		<del></del>			

BARTLESVILLE, OK 918/338-0808

Signed

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

Date

GILLETTE, WY 307/686-4914

**AUTHORIZATION** 

#249439

# COMBOLIDATED OR WAS DEVINED. LLC CEMENT FIELD TICKET AND TREATMENT REPORT

#### State, County Cement Type CLASS A Customer Montgomery, Kansas rockin bar nothing Section Excess (%) 30 Job Type longstring 6972 TWP Density 13.7 Customer Acct # Water Required rbn 10 RGE Well No. Yeild 1.75 Formation Mailing Address City & State Slurry Weight Hole Size 5 5/8 Hole Depth Siurry Volume Zip Code 2 7/8INCH Displacement Casing Size Contact Displacement PSI Casing Depth 715 Email MIX PSI Drill Pipe Cell BARTLESVILLE Rate Tubing Dispatch Location Price per Unit Unit Code Coment Pump Charges and Mileage Quantity CEMENT PUMP (2 HOUR MAX) 2 HRS MAX \$1,030.00 1,030.00 5401 \$4.00 140.00 35 PER MILE EQUIPMENT MILEAGE (ONE-WAY) 5406 \$350.00 350.00 PER LOAD 5407 MIN. BULK DELIVERY (WITHIN 50 MILES) 1 n \$0.00 \$ 0 \$0.00 0 0 \$0.00 ō 0 0 \$0.00 0 \$0.00 U COTAS PER FOOT 157.30 0.22 715 . 5412 **EQUIPMENT TOTAL** 1,677.30 \$ Cement, Chemicals and Water 1,344.00 THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CLORIDE 70 0 \$19.20 1126A 40 0 \$1.29 \$ 51.60 PHENOSEAL 1107A 161.00 350 0 \$0.46 1110A KOL SEAL (50 # SK) 31.50 \$0.21 1118B PREMIUM GEL/BENTONITE (50#) 150 O 66. Ø CITY WATER (PER 1000 GAL) 0 \$16.54 S 1123 \$0.00 0 n \$0.00 ō 0 \$0.00 n \$ \$0.00 0 n \$0.00 ō 0 \$0.00 0 CHEMICAL TOTAL 1,654.26 Water Transport TER TRANSPORT (CEME \$112.00 224.00 WATER TRANSPORT (CEMENT) 2 5501C \$0.00 n \$0.00 0 0 TRANSPORT TOTAL 224.00 Coment Floating Equipment (TAXABLE) \$0.00 0 \$ 0 \$0.00 ٥ \$0.00 O 0 Float Shoe 0 \$0.00 \$ a Float Collers \$ 0 \$0.00 Guide Shoes 0 \$0.00 \$ 0 telle and Flagger Plates 0 \$0.00 1 0 Packer Shoes \$ 0 \$0.00 0 OV Tools \$0.00 0 0 Veloci Success Clarics Misc \$0.00 0 \$0.00 Ω n \$0.00 0 Phase and Bull Seelers 0 \$0.00 28.00 4402 2 7/8 plug Downtrale Tools \$0.00 n 0 CEMENT FLOATING EQUIPMENT TOTAL | \$ 28.00 SUB TOTAL S SALES TAX TOTAL S (-DISCOUNT) 3,583.56 DRIVER NAME 6.30% mike h 518 10% DISCOUNTED TOTAL \$ 3.320.4X

## CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	rockin bar nothing	State, County	Montgomery , Kansas	Cement Type	CLASS A
Customer Acct #	longstring	Section	0	Excess (%)	30
Well No.	0	TWP	0	Density	13.7
Mailing Address	rbn 10	RGE	0	Water Required	0
City & State	0	Formation	0	Yeild	1.75
Cip Code	0	Hole Size	5 5/8	Slurry Weight	o
Contact	0	Hole Depth	0	Slurry Volume	0
Email	0	Casing Size	2 7/8INCH,	Displacement	o
Cell	0	Casing Depth	715	Displacement PSI	0
Office	0	Drill Pipe	0	MIX PSI	o
Dispatch Location	BARTLESVILLE	Tubing	0	Rate	0
REMARKS		Á		<del></del>	

Ran 3 sks of gel established curculation. Ran 70 sks of thickset shut down washed pump and lines of	clean. Dropped plug displaced
to bottom plug landed and held. Put 200psi on and shut in. Cement curculated to surface.	
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	Volum 11000,000 v
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	LI NAT
	W/W
	/ 174

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August 28, 2012

Brandon Owens Rockin Bar Nothing Ranch, Inc. 2339 COUNTY RD 2800 INDEPENDENCE, KS 67301-7187

Re: ACO-1 API 15-125-32190-00-00 Melander A RBN 10 NW/4 Sec.11-34S-14E Montgomery County, Kansas

Dear Brandon Owens:

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 4/24/2012 and the ACO-1 was received on August 28, 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**