



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1082795  
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: \_\_\_\_\_

1082795

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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Form	ACO1 - Well Completion
Operator	Anderson Energy, Inc.
Well Name	Grabbe 1
Doc ID	1082795

Tops

Name	Top	Datum
Anhydrite	1173	+828
B/Anhydrite	1212	+789
Topeka	2967	-966
Heebner	3248	-1247
Toronto	3266	-1265
Lansing	3294	-1293
BKC	3540	-1539
Conglomerate	3600	-1599
Arbuckle	3634	-1633
Reagan	3735	-1734
LTD	3799	-1788

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL PLUGGING RECORD**  
K.A.R. 82-3-117

Form CP-4  
March 2009  
Type or Print on this Form  
Form must be Signed  
All blanks must be Filled

OPERATOR: License #: 6484  
Name: Anderson Energy, Inc.  
Address 1: 300 W. Douglas, Suite 410  
Address 2: \_\_\_\_\_  
City: Wichita State: KS Zip: 67202 + \_\_\_\_\_  
Contact Person: Bill Anderson  
Phone: ( 316 ) 263-1006  
Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic  
 Water Supply Well  Other: \_\_\_\_\_  SWD Permit #: \_\_\_\_\_  
 ENHR Permit #: \_\_\_\_\_  Gas Storage Permit #: \_\_\_\_\_  
Is ACO-1 filed?  Yes  No If not, is well log attached?  Yes  No  
Producing Formation(s): List All (If needed attach another sheet)  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API No. 15 - 051-26298-00-00  
Spot Description: \_\_\_\_\_  
N/2  SW  SW  NW Sec. 19 Twp. 15 S. R. 18  East  West  
2,160 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Ellis  
Lease Name: Grabbe Well #: 1  
Date Well Completed: 5/5/2012  
The plugging proposal was approved on: 5/4/2012 (Date)  
by: Bruce Rodie - KCC Hays (KCC District Agent's Name)  
Plugging Commenced: 5/5/2012  
Plugging Completed: 5/5/2012

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		Surface	8 5/8"	1193'	None

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

1st plug - 3654' - 25 sks, 2nd - plug 1240' - 50 sks, 3rd plug - 500' - 90 sks, 4th plug - 40' - 10sks with wiper plug, 30 sks in the rat hole, 15 sks in the mouse hole. Cement was provided by Allied Oil & Gas Services Ticket #56404. Cement material was a total of 210 sks of 60/40 POZ Mix 4% GEI, 1/4# Floseal/sk.

Plugging Contractor License #: 34233 Name: Maverick Drilling LLC  
Address 1: 100 S. Main, Suite 440 Address 2: \_\_\_\_\_  
City: Wichita State: KS Zip: 67202 + \_\_\_\_\_  
Phone: ( 316 ) 262-6700  
Name of Party Responsible for Plugging Fees: Anderson Energy, Inc.  
State of Kansas County, Sedgwick, ss.  
William L. Anderson  Employee of Operator or  Operator on above-described well  
(Print Name)

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

Signature: William L. Anderson

# ALLIED OIL & GAS SERVICES, LLC 056101

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <u>4/28/12</u>	SEC <u>19</u>	TWP <u>15s</u>	RANGE <u>12W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00</u>	JOB FINISH <u>7:30</u>
LEASE <u>61022</u>	WELL # <u>1</u>	LOCATION <u>Thays Ins Mack Dealer</u>			COUNTY <u>LeFlore</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)		<u>3W + E into</u>					

CONTRACTOR <u>Mavrick #102</u>	OWNER
TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>12 1/4</u>	T.D. <u>1195</u>
CASING SIZE <u>8 5/8</u>	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

CEMENT	
AMOUNT ORDERED <u>375 sk ALL 2A</u>	
<u>150 sk class A 37.00 21.00</u>	

COMMON	<u>150</u>	@	<u>11.38</u>	<u>1707.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>14.88</u>	<u>44.64</u>
CHLORIDE	<u>17</u>	@	<u>40.24</u>	<u>692.08</u>
ASC		@		
<u>Plum gel</u>	<u>94</u>	@	<u>1.89</u>	<u>177.66</u>
<u>Allied light wt cement</u>	<u>375</u>	@	<u>10.15</u>	<u>3,806.25</u>
<u>type 2 class A</u>		@		
		@		
		@		
		@		
HANDLING	<u>604 sk</u>	@	<u>1.47</u>	<u>887.98</u>
MILEAGE				<u>417.83</u>
TOTAL				<u>7733.84</u>

RECEIVED  
MAY 05 2012

EQUIPMENT	
PUMP TRUCK	CEMENTER <u>John BOB S</u>
# <u>409</u>	HELPER <u>KARY</u>
BULK TRUCK	
# <u>410</u>	DRIVER <u>R. B. Y.</u>
BULK TRUCK	
# <u>481</u>	DRIVER

REMARKS:

can't get circulation, cement 15min  
mixer 375 sk ALL 2A then 142 sk class A 21.00 31.24  
refer to Displacement 735 bbls H<sub>2</sub>O  
Pump truck # 720

Cement bid circular to surface!

Thanks

CHARGE TO: Anderson Oil  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	<u>1347.50</u>
EXTRA FOOTAGE	@
MILEAGE <u>MIL HV 10</u>	@ <u>4.90</u> <u>49.00</u>
MANIFOLD	@
<u>MIL LV 10</u>	@ <u>2.80</u> <u>28.00</u>
<u>amt. head to manifold 1</u>	@ <u>140.00</u>
<u>Paint</u>	
TOTAL <u>1564.50</u>	

PLUG & FLOAT EQUIPMENT

<u>Back Plate</u>	@	<u>78.40</u>
<u>1st Rubber Plug</u>	@	<u>78.40</u>
<u>Cement Bucket</u>	@	<u>334.60</u>
<u>Controler</u>	@	<u>89.60</u>
	@	

TOTAL 581.00

SALES TAX (If Any)	<u>441.57</u>
TOTAL CHARGES	<u>9,879.34</u>
DISCOUNT	<u>-0-</u>

IF PAID IN 30 DAYS

PRINTED NAME Terry Stuckey  
SIGNATURE [Signature]

Bid

# ALLIED OIL & GAS SERVICES, LLC 056404

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell KS

*Well File*

DATE <u>5-25-12</u>	SEC. <u>19</u>	TWP. <u>15</u>	RANGE <u>18</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00AM</u>	JOB FINISH <u>5:30AM</u>
LEASE <u>GARBE</u>	WELL # <u>1</u>	LOCATION <u>GARBE WELDING IS 2W 1/4 N 1/4 E</u>			COUNTY <u>ELLIS</u>	STATE <u>KANSAS</u>	
OLD OR NEW (Circle one) <u>NEW</u>							

CONTRACTOR <u>MAVERICK DRILL RIG #108</u>	OWNER
TYPE OF JOB <u>ROTARY PLUG</u>	
HOLE SIZE <u>7 1/8</u>	T.D. <u>3780</u>
CASING SIZE <u>8 5/8 SURFACE</u>	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2 X-H</u>	DEPTH <u>3654</u>
TOOL	DEPTH
PRES. MAX	MINIMUM <u>1</u>
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	
EQUIPMENT	
PUMP TRUCK CEMENTER <u>Glean G.</u>	
# <u>417</u> HELPER <u>Woody O.</u>	
BULK TRUCK	
# <u>481</u> DRIVER <u>Cody H.</u>	
BULK TRUCK	
#	DRIVER
CEMENT	
AMOUNT ORDERED <u>220 SX 40 4% GEL</u>	
<u>1/4 # F10-SEAL PER SX</u>	
COMMON <u>132 SX @ 16.25</u>	<u>2145.00</u>
POZMIX <u>88 SX @ 8.50</u>	<u>748.00</u>
GEL <u>9 SX @ 21.25</u>	<u>191.25</u>
CHLORIDE	@
ASC	@
F10-Seal <u>55 LBS @ 2.70</u>	<u>148.50</u>
	@
	@
	@
	@
	@
	@
HANDLING <u>229 TOTAL SX @ 2.25</u>	<u>515.25</u>
MILEAGE <u>40 Total Mile @ 11¢</u>	<u>440.00</u>
<u>9160</u>	TOTAL <u>4755.60</u>

REMARKS:

- 25 SX @ 3654
- 50 SX @ 1240
- 90 SX @ 500
- 10 SX @ 40'
- 15 SX @ Mouse hole
- 30 SX @ Rathole

*THANK'S*

*\*Bill Anderson/Roger Fisher*

CHARGE TO: ANDERSON ENERGY INC  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE

DEPTH OF JOB <u>3654</u>	
PUMP TRUCK CHARGE	<u>1250.00</u>
EXTRA FOOTAGE	@
MILEAGE <u>40 HV ME @ 7.00</u>	<u>280.00</u>
MANIFOLD	@
<u>40 LV ME @ 4.00</u>	<u>160.00</u>
	@
TOTAL	<u>1690.00</u>

PLUG & FLOAT EQUIPMENT

<u>8 5/8 WOODEN</u>	<u>64.00</u>
<u>Wiper</u>	@
<u>Plug</u>	@
	@
	@
TOTAL	<u>64.00</u>

To: Allied Oil & Gas Services, LLC.  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Jeremy Stuckey  
SIGNATURE [Signature]

SALES TAX (If Any) 410.10  
TOTAL CHARGES 6509.60  
DISCOUNT 20/50 1736.20 IF PAID IN 30 DAYS



**Anderson Energy, Inc.**  
**#1 Grabbe**  
**2160' FNL & 330' FWL**  
**Section 19-T15S-18W, Ellis County, Kansas**  
**Elevation: 1993' gl, 2001' kb**

DST #1, 3304-48' Lansing C & D zones.  
45 (45) 45 (45)  
Rec 120' Muddy Water and 380' Water.  
IFP: 32-106# FFP 124-176# ISIP 344# FSIP 345#.

DST #2 Lansing E & F zones 3351-78'.  
30 (45) 45 (60) Rec 50' Muddy Water w/ show of oil.  
IFP 18-41# FFP 46-70# ISIP 583# FSIP 522#.

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

May 30, 2012

Bill Anderson  
Anderson Energy, Inc.  
300 W DOUGLAS AVE, STE 410  
WICHITA, KS 67202

Re: ACO1  
API 15-051-26298-00-00  
Grabbe 1  
NW/4 Sec.19-15S-18W  
Ellis 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,  
Bill Anderson