Confidentiality Requested:
☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1086665

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 # 31439
Name: Kinney Oil Company
Address 1: 1401 17TH ST STE 870
Address 2:
City: DENVER State: CO Zip: 80202 + 1246
Contact Person: Jeremy Kinney
Phone: (303) 295-1770
CONTRACTOR: License # 30141
Name: Summit Drilling Company
Wellsite Geologist: Steve Miller
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 #:

4/9/2012	4/13/2012	4/13/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-131-20230-00-00
Spot Description:
W2 NW NE NW Sec. 11 Twp. 2 S. R. 13 ☑ East ☐ West
330 Feet from ☑ North / ☐ South Line of Section
1600 Feet from ☐ East / ☑ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☑ NW ☐ SE ☐ SW
GPS Location: Lat: (e.g. xx.xxxxx), Long: (e.g. -xxx.xxxxx)
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Nemaha
Lease Name: Moser 1-11 Well #: 1
Field Name:
Producing Formation: D&A
Elevation: Ground: 1268 Kelly Bushing: 1278
Total Vertical Depth: 950 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 262 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: 900 ppm Fluid volume: 1520 bbls
Dewatering method used: Evaporated
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: 07/09/2012
☑ **Confidential Release Date:** 07/09/2014
☑ **Wireline Log Received**
☐ **Geologist Report Received**
☐ **UIC Distribution**
ALT ☑ **I** ☐ **II** ☐ **III** **Approved by:** NAOMI JAMES **Date:** 07/10/2012

1086665

Operator Name: Kinney Oil Company Lease Name: Moser 1-11 Well #: 1

Sec. 11 Twp. 2 S. R. 13 ☑ East ☐ West County: Nemaha

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 ☐ Yes ☑ No
(Attach Additional Sheets)

Samples Sent to Geological Survey ☑ Yes ☐ No

Cores Taken ☐ Yes ☑ No

Electric Log Run ☑ Yes ☐ No

List All E. Logs Run:

Phased induction
Neutron density micro
Sonic

☑ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Heebner	414	864
Lansing	525	753
BKC	770	508
PreCambrian	878	400

CASING RECORD ☑ New ☐ 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
Surface casing	12.25	8.625	24	262	Class A	160	2% gel & 3% CC

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
____ Perforate ____ Protect Casing ____ Plug Back TD ____ 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 *(Amount and Kind of Material Used)*	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

DISPOSITION OF GAS:
☐ Vented ☐ Sold ☐ Used on Lease
(If vented, Submit ACO-18.)

METHOD OF COMPLETION:
☐ Open Hole ☐ Perf. ☐ Dually Comp. *(Submit ACO-5)* ☐ Commingled *(Submit ACO-4)*
☐ Other *(Specify)* _____

PRODUCTION INTERVAL:
_____
_____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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 # 248958

Invoice Date: 04/13/2012 Terms: 0/0/30,n/30 Page 1

KINNEY OIL COMPANY
1401 17TH ST, SUITE 870
DENVER CO 80202
(303)295-1770

MOSER 1-11 #1
36421
11-25-3E
04-10-12
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	160.00	14.9500	2392.00
1102	CALCIUM CHLORIDE (50#)	452.00	.7400	334.48
1118B	PREMIUM GEL / BENTONITE	301.00	.2100	63.21
1107	FLO-SEAL (25#)	40.00	2.3500	94.00

	Description	Hours	Unit Price	Total
515	TON MILEAGE DELIVERY	1278.40	1.34	1713.06
520	CEMENT PUMP (SURFACE)	1.00	825.00	825.00
520	EQUIPMENT MILEAGE (ONE WAY)	170.00	4.00	680.00

V20763
0113100018
7309

Parts:	2883.69	Freight:	.00	Tax:	210.51 AR		6312.26
Labor:	.00	Misc:	.00	Total:	6312.26		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 36421 ✓
LOCATION Eureka, KS
FOREMAN Shannon Feck

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

FIELD TICKET & TREATMENT REPORT
CEMENT API # 15-131-20230

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-10-12	4570	moser 1-11 #1	11	25	3E	Nemaha

CUSTOMER: Kinney Oil Company
MAILING ADDRESS: 1401 17th St Ste 870
CITY: Denver | STATE: CO | ZIP CODE: 80202

Summit DRLG

TRUCK #	DRIVER	TRUCK #	DRIVER
520	John S		
515	Calin H		

JOB TYPE Surface 0 HOLE SIZE 12¼" HOLE DEPTH 278' CASING SIZE & WEIGHT 8⅝"
CASING DEPTH 261.63 6.L DRILL PIPE — TUBING — OTHER —
SLURRY WEIGHT 14.5-15# SLURRY VOL ____ WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
DISPLACEMENT 16.4 Bbl DISPLACEMENT PSI 100 MIX PSI 200 RATE 5 BPM

REMARKS: Rig up to 8⅝" casing, Break Circulation w/10 Bbl water, mixed 160 sks Class "A" cement w/3% Calcium, 2% gel, & ¼# Flo-cele/sk @ 14.5-15#/gal. Displace w/16.4 Bbl water & shut well in. Good circulation @ all times 12 Bbl slurry to pit. Job complete.

"Thanks Shannon & crew"

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	170	MILEAGE	4.00	680.00
1104S	160 sks	Class "A" cement	14.95	2392.00
1102	452 #	Calcium @ 3%	.74	334.48
1118B	301 #	Gel @ 2%	.21	63.21
1107	40 #	Flo-cele @ ¼#/sk	2.35	94.00
5407A	7.52 Tons	Ton mileage bulk truck	1.34	1713.06
			Sub Total	6101.75
		7.3%	SALES TAX	210.51
			ESTIMATED TOTAL	6312.26

Ravin 3737

248958

AUTHORIZTION Dan Cap 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

Ø	Ø	Ø	Ø
Ø	Ø	Ø	Ø
Ø	Ø	Ø	Ø

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802

Kansas
Corporation Commission

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 09, 2012

Jeremy Kinney
Kinney Oil Company
1401 17TH ST STE 870
DENVER, CO 80202-1246

Re: ACO1
API 15-131-20230-00-00
Moser 1-11 1
NW/4 Sec.11-02S-13E
Nemaha 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,
Jeremy Kinney