Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1087996

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 #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Operator Name:
GSW Permit #:	License #:
	Quarter Sec TwpS. R East West
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date Recompletion Date	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:						

	Page Two	1087996
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	
INCTRUCTIONS. Chain important tang of formations panetrated. De	tail all aaraa Bapart all final	apping of drill stome tools giving interval toolad, time tool

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 (Attach Additional She	eets)	Yes No		-	on (Top), Depth ar		Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
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
		ADDITIONAL	CEMENTING / SQU	EEZE RECORD			
Purpose:	Depth	Trace of Ocean ant	III On also I land		Turne and D		

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

(If No, skip questions 2 and 3) (If No, skip question 3)

No

No

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				A		ement Squeeze Record of Material Used)	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner Ru	n:	No	
Date of First, Resumed	Product	ion, SWD or ENHF	} .	Producing N		oing	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	S.	Gas	Mcf	Wat	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF C	AS:			METHOD				PRODUCTION IN	TERVAL:
Vented Solo	1 🗌 I	Jsed on Lease		Open Hole	Perf.		Comp.	Commingled		
(If vented, Su	bmit ACC	0-18.)		Other (Specify)	(Submit)		(Submit ACO-4)		

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

CONSOLN Oil Well Serv	Consolidated Oil Wall Sc	620/431-9210 • 1-800/467-8676 Fax 620/431-0012 6					
INVOICE		Invoice # 251067					
Invoice Date: 07/11	/2012 Terms: 10/10/30,n/30	0 Page 1					
VAL ENERGY 200 WEST DOUGLAS SUITE 520 WICHITA KS 67202 () - WICHITA KS 67202 () - ()							
Part Number 11045 1102 1118B	Description CLASS "A" CEMENT (SALE) CALCIUM CHLORIDE (50#) PREMIUM GEL / BENTONITE	Qty Unit PriceTotal165.0017.65002912.25465.00.8900413.85310.00.250077.50					
Sublet Performed 9996-130 9995-130	Description CEMENT MATERIAL DISCOUNT CEMENT EQUIPMENT DISCOUNT	Total -340.36 -180.34					
Description 460 TON MILEAGE DE 463 CEMENT PUMP (S 463 EQUIPMENT MILE	URFACE)	Hours Unit PriceTotal1.00518.401.001085.001001085.0040.005.00					

Amount Due 5421.42 if paid after 08/10/2012

========				
Parts:	3403.60 Freight:	.00 Tax:	192.98 AR	4879.28
Labor:	.00 Misc:	.00 Total:	4879.28	
Sublt:	-520.70 Supplies:	.00 Change:	.00	
=========		=======================================		=======

Signed

EL DORADO, KS EUREKA, KS 316/322-7022 620/583-7664

PONCA CITY, OK 580/762-2303

ITY, OK C -2303 78

OAKLEY, KS 785/672-2227

OTTAWA, KS 785/242-4044

Date

THAYER, KS 620/839-5269

PO Box 884, Ci		IELD TICKET	& TREAT	MENT REF	TICKET NUM LOCATION FOREMAN PORT	Oakley Walt	987 Ks Duke (
620-431-9210 c	or 800-467-8676	ELL NAME & NUMBI	CEMENT		TOWNSHIP	loe Blan	COUNTY
7-1-12		the Trost	1-29	29		2,W	- <u> </u>
CUSTOMER	<u> 0514 10r</u>				<u>//</u> >		ness
	Energy Tuc_		Brownell	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE			468 [<u> 463 </u>	Cory Da	018	
	STATE		1/450	460	Bolday	tional	
					ļ		
	Face HOLE SIZE	12/4		7251		03	
CASING DEPTH	224^{1} DRILL PIPE		HOLE DEPTH		CASING SIZE &		18 -207
SLURRY WEIGHT						OTHER	4 0.1
		, ·	WATER gal/sk <u>.</u> MIX PSI			I CASING_1, <u>7</u> BPm	7020
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Mixed	165 sks com	7% 66- 7	1 / / · /	$\frac{1}{2}$		it a d	4:
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		Comot	$\frac{1}{2}$	1.00			
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ACCOUNT	QUANITY or UNITS	DESC	CRIPTION of S	ERVICES or PR	-	+ere.)	TOTAL
CODE	QUANITY or UNITS			ERVICES or PR	-		TOTAL
	1	PUMP CHARGE		ERVICES or PR	-	+ere.)	TOTAL
CODE 54015 5406	40	PUMP CHARGE MILEAGE			-	+ Cre.) UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$	
CODE 54015 5406 11045	40 165 sks		A Com	e.t	-	$+Cre_{1}$ UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65	1,085°° 200° 2,91225
code 54015 5406 11045 1102	40 165 sks 465 #	PUMP CHARGE MILEAGE Class Calcius		e.t	-	+ Cre.) UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$	1,08500 2000 2,912 413
CODE 54015 5406 11045 1102 11183	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,08500 200 - 200
code 54015 5406 11045 1102	40 165 sks 465 #	PUMP CHARGE MILEAGE Calass	A Com	e.t	-	$+Cre_{1}$ UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65	1,08500 2000 2,912 413 23 7150
CODE 54015 5406 11045 1102 11183	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Class Calcium	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,085-00 200- 2,912 <u>2</u> 413 8
CODE 54015 5406 11045 1102 11183	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,08500 200 2,912 413 2 7150
CODE 54015 5406 11045 1102 11183	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,08500 200 2,912 413 2 7150
CODE 54015 5406 11045 1102 11183	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,08500 200 2,912 413 2 7150
CODE 54015 5406 11045 1102 11183	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,08500 200 2,912 413 29 7150
CODE 54015 5406 11045 1102 11183	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,08500 200 2,912 413 29 7150
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre.) UNIT PRICE 1,085° 5° 17.65 189 125 167	1,08500 2000 2,912 413 23 7150
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t	-	+ Cre_{1} UNIT PRICE $1,085^{\circ\circ}$ $5^{\circ\circ}$ 17.65 189 189 125	1,08500 200 2,912 413 29 7150
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t		+ Cre.) UNIT PRICE 1,085° 5° 17.65 189 125 167	1,08500 200 2,912 413 29 7150
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t		+ Cre.) UNIT PRICE 1,085 ⁰⁰ 5 ⁰⁰ 1765 189 125 167	1,08500 200 2,912 413 2 7150
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	ent eride Delivery		+ Cre.) UNIT PRICE 1,085 ⁰⁰ 5 ⁰⁰ 1765 189 125 167	1,08500 200 2,912 413 29 7150
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	e.t		+ Cre.) UNIT PRICE 1,085 ⁰⁰ 5 ⁰⁰ 1765 189 125 167	1,085-00 200- 2,912 2 413 8 715 518 40 518 40 518 40
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	ent eride Delivery		+ Cre.) UNIT PRICE 1,085° 5° 1765 189 125 167	1,08500 200 2,912 413 518 40 518 518 518 518 518 518 518 518 518 518
CODE 54015 5406 11045 1102 11183 5407A	40 165 sks 465 # 310 #	PUMP CHARGE MILEAGE Calass	A Com. m Chle	ent eride Delivery		+ Cre.) UNIT PRICE 1,085 5 5 17.65 189 125 167 167	1 08500 200 2,912 413 518 40 518 40 518 40 518 40

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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 251067

CONSOLIN Oil Well Servi	Consolidated Oil V	Vell Services, LLC 970 x 4346	MAIN OFFICE P.O. Box 884 Chanute, KS 66720 620/431-9210 • 1-800/467-8676 Fax 620/431-0012		
INVOICE			Invoice #	251255	
Invoice Date: 07/16	/2012 Terms: 10/10/30	,n/30	============== Pa	======= age 1	
VAL ENERGY 200 WEST DOUGLA WICHITA KS 672 () -		NORTH TRUST # 37004 29-16-21 07-14-2012 KS 9233-1	RECEI JUL 1 9		
Part Number 1131 1118B 1107	Description 60/40 POZ MIX PREMIUM GEL / BENTONIT FLO-SEAL (25#)	260.00	.2500	Total 3926.00 223.50 183.30	
Sublet Performed 9996-130 9995-130	Description CEMENT MATERIAL DISCOU CEMENT EQUIPMENT DISCO			Total -433.28 -203.51	
Description 399 P & A NEW WELL 399 EQUIPMENT MILE 566 MIN. BULK DELIV		Hours 1.00 30.00 1.00	Unit Price 1325.00 5.00 560.10	Total 1325.00 150.00 560.10	

Amount Due 6640.87 if paid after 08/15/2012

	=========	==================			================		
Parts:	4332.80	Freight:	.00	Tax:	245.67	AR	5976.78
Labor:	.00	Misc:	.00	Total:	5976.78		
Sublt:	-636.79	Supplies:	.00	Change:	.00		
=========							

Signed

KS EUREKA, KS 22 620/583-7664 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

CONSOLIDATED
Gil Wull Barriana, LLC

TICKET NUM	<u>ивер 3</u>	7004
LOCATION_		
FOREMAN_	Miles	Shaw

UNTY

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

CUSTOMER #

DATE

FIELD TICKET & TREATMENT REPORT CEMENT						
WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	Т		
h Trust # 1-29	29	16S	ZIW	+		

7-14-12 8576	North Trust # 1	-29	29	165	ZIW	Ness
CUSTOMER Val Cner						
MAILING ADDRESS	99		TRUCK #	DRIVER	TRUCK #	DRIVER
MALING ADDRESS	·		399	Ormon M		
		ک	46	BobbyS		
CITY	STATE ZIP CODE] [~				
JOB TYPE_ <u>PTA</u>	HOLE SIZE 7 1/2		1300	CASING SIZE & W	EIGHT	
CASING DEPTH	DRILL PIPE	_TUBING			OTHER	
SLURRY WEIGHT 14.2	SLURRY VOL_1.40	WATER gal/sk_		CEMENT LEFT in		
				RATE	·····	
REMARKS: Safety MI	enting + Rigupo	in Iral E	nergy 1	2:5HZ PI	48 55 600	lored
50 SHS @ 1560'				<u></u>		
SU 545 @ 870'						
50 543 @ 450'	240 8hs 60	140 10 -	489el	14 4 Plusan	/	
40 5632 240'						
TOP 20 SKS				· · · · · · · · · · · · · · · · · · ·		
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ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		TOTAL
5405N	/	PUMP CHARGE	1325,00	1325.00
5406	30	MILEAGE	500	150.00
5407	11,18	ton M. trass delivery	1167	560,10
11.3/	260 545	Collyo Roz Coment mix	IS.D	3926.00
1118B	894	Bentonite Gel	.25	223.50
1107	45	Ho seal	2.82	183.30
· · · · · ·				
			Subhotes	4347,9D
		lass 108 da	Scount.	636.79
			Subtotal	5731.11
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Ravin 3737			SALES TAX	245.67
	MILAN		TOTAL	5976,18
AUTHORIZTION_	Michael Brany	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.

251255



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Mark Sievers, Chairman Thomas E. Wright, Commissioner Sam Brownback, Governor

July 30, 2012

TODD ALLAM Val Energy, Inc. 200 W DOUGLAS AVE STE 520 WICHITA, KS 67202-3005

Re: ACO1 API 15-135-25432-00-00 NORTH TRUST 1-29 SE/4 Sec.29-16S-21W Ness 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, TODD ALLAM