



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1088277
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: _____

1088277

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No 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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <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> _____	PRODUCTION INTERVAL: _____ _____
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JOB LOG

SWIFT Services, Inc.

DATE 06-19-12 PAGE NO. 1

CUSTOMER PFEIFER EXPLORATIONS WELL NO. 07-1 LEASE SCHULTE JOB TYPE LOGGING TICKET NO. 21323

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1300							ON LOCATION CMT: 350 SWS SMD 1/4" FLO. LTD 3450 RTD 3448, SET P/DE 3449, SJ 1732 TRSCT 3431 S 1/2 14" CENT 1, 3, 5, 7, 9, 11, 13, 15, 17 BASSETS S. 11, 44 JOINS OUT 4 - #83, 84, 85, 86
	2130							START CS69 FLOATED TAG BITTEN - DROP BALL
	2330							BREAKING W/RIG PLUG RH 30,
	0015	6.0	7				200	500GALS MUD FLUSH
			20					200GALS MUD FLUSH
			135					245 SWS SMD @ 11d*
			20					75 SWS SMD @ H.S.*
			155					320 SWS DROP LOG PLUG, WASHOUT PL
		60	0				300	START DLS
			60.0				600	
			70.0				700	
			80.0				800	CIRC OUT MUD FLUSH!
	0100		23.7				1400	LAND PLUG REVERSE, - DRY
	0145							JOB COMPLETE THANK YOU! DAVE, JOSH, BOB

We Appreciate Your Business!

QUALITY WELL SERVICE, INC.

5586

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410
Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	6-13-12	Sec.	27	Twp.	14	Range	16	County	Ellis	State	KS	On Location		Finish	6:45pm
Lease	Exhulte		Well No.	27-1		Location 3 1/2 S of walker, KS Winto									

Contractor	Integrity Drilling #7		Owner	To Quality Well Service, Inc.		
Type Job	Surface		You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size	12 1/4	T.D.	988	Charge To	Pfeifer Explorations	
Csg.	8 5/8	Depth	992.76			
Tbg. Size		Depth				
Tool		Depth				
Cement Left in Csg.	4263	Shoe Joint		The above was done to satisfaction and supervision of owner agent or contractor.		
Meas Line		Displace	60.5	Cement Amount Ordered	450 sx com 3% cc 2% gel	

EQUIPMENT

Pumptrk	No.	8	David	Common	450
Bulktrk	No.	5	Mike	Poz. Mix	
Bulktrk	No.	4	Derrick	Gel.	8
Pickup	No.			Calcium	16

JOB SERVICES & REMARKS

Rat Hole		Hulls	
Mouse Hole		Salt	
Centralizers		Flowseal	
Baskets		Kol-Seal	
D/V or Port Collar		Mud CLR 48	
Run 23 Jts of 8 5/8 casing and landing JS		CFL-117 or CD110 CAF 38	
EST Circulation		Sand	
		Handling	474
		Mileage	15

FLOAT EQUIPMENT

Hooked up and mixed 450 sx - shut down released plug and disp with 60.5 bbl H2O - plug landed @ psi	Guide Shoe	
	Centralizer	
	Baskets	
	AFU Inserts	
	Float Shoe	
	Latch Down	
Cement did circulate!!		8 5/8 Rubber Plug
Thank You!!	Pumptrk Charge	Surface
	Mileage	15

X Signature *Lith Lynd*

Tax
Discount
Total Charge



DRILL STEM TEST REPORT

Prepared For: **Pfeifer Explorations, LLC**

309 W. 40th
Hays KS 67601

ATTN: Roger Moses

Schulte #27-1

27-14s-16w Ellis,KS

Start Date: 2012.06.19 @ 04:15:31

End Date: 2012.06.19 @ 12:12:01

Job Ticket #: 49254 DST #: 1

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2012.06.20 @ 11:49:40



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Pfeifer Explorations, LLC

27-14s-16w Ellis, KS

309 W. 40th
Hays KS 67601

Schulte #27-1

Job Ticket: 49254

DST#: 1

ATTN: Roger Moses

Test Start: 2012.06.19 @ 04:15:31

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 06:42:01

Time Test Ended: 12:12:01

Test Type: Conventional Straddle (Initial)

Tester: Brett Dickinson

Unit No: 59

Interval: 3360.00 ft (KB) To 3394.00 ft (KB) (TVD)

Reference Elevations: 1867.00 ft (KB)

Total Depth: 3450.00 ft (KB) (TVD)

1857.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 10.00 ft

Serial #: 6753 Outside

Press @ Run Depth: 196.28 psig @ 3390.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2012.06.19

End Date:

2012.06.19

Last Calib.:

2012.06.19

Start Time:

04:15:36

End Time:

12:12:00

Time On Btm:

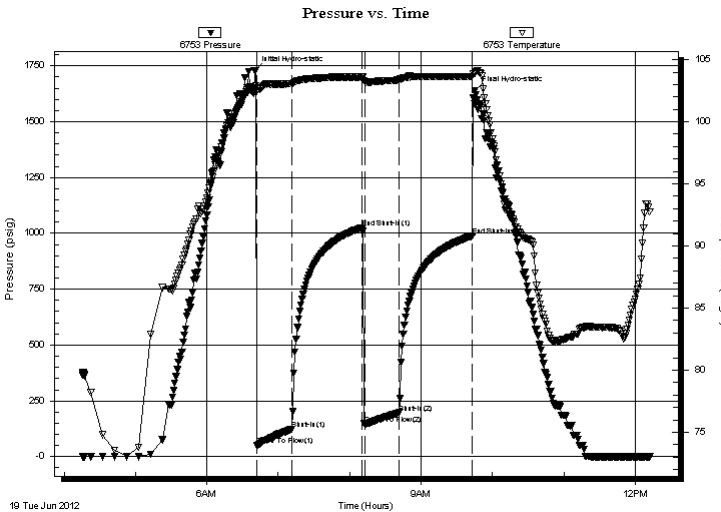
2012.06.19 @ 06:40:01

Time Off Btm:

2012.06.19 @ 09:45:31

TEST COMMENT: IF-BOB in 5 min
IS-1 1/4" blow died back to 1/4"
FF-BOB in 6 min
FS-2" blow died back to 1"

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1728.50	102.72	Initial Hydro-static
2	50.48	102.47	Open To Flow (1)
31	122.01	103.06	Shut-In(1)
91	1024.73	103.61	End Shut-In(1)
93	145.90	103.22	Open To Flow (2)
122	196.28	103.36	Shut-In(2)
183	989.08	103.66	End Shut-In(2)
186	1637.78	103.97	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
15.00	GO 15%G 85%O	0.07
105.00	GMCO 15%G 45%O 40%M	1.34
270.00	GO 15%G 85%O	3.79
0.00	210ft GIP	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Pfeifer Explorations, LLC

27-14s-16w Ellis,KS

309 W. 40th
Hays KS 67601

Schulte #27-1

Job Ticket: 49254

DST#: 1

ATTN: Roger Moses

Test Start: 2012.06.19 @ 04:15:31

Tool Information

Drill Pipe:	Length: 3311.00 ft	Diameter: 3.80 inches	Volume: 46.44 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: ft	Diameter: 2.70 inches	Volume: - bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 30.00 ft	Diameter: 2.25 inches	Volume: 0.15 bbl	Weight to Pull Loose: 50000.00 lb
			<u>Total Volume: - bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	9.00 ft			String Weight: Initial 45000.00 lb
Depth to Top Packer:	3360.00 ft			Final 47000.00 lb
Depth to Bottom Packer:	3394.00 ft			
Interval between Packers:	34.00 ft			
Tool Length:	121.00 ft			
Number of Packers:	3	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			3333.00	
Shut In Tool	5.00			3338.00	
Hydraulic tool	5.00			3343.00	
Jars	5.00			3348.00	
Safety Joint	3.00			3351.00	
Packer	4.00			3355.00	28.00 Bottom Of Top Packer
Packer	5.00			3360.00	
Stubb	1.00			3361.00	
Perforations	29.00			3390.00	
Recorder	0.00	8369	Inside	3390.00	
Recorder	0.00	6753	Outside	3390.00	
Blank Off Sub	4.00			3394.00	34.00 Tool Interval
Packer	4.00			3398.00	
Stubb	1.00			3399.00	
perforations	7.00			3406.00	
Change Over Sub	1.00			3407.00	
Recorder	0.00	8319	Below	3407.00	
Blank Spacing	32.00			3439.00	
Change Over Sub	1.00			3440.00	
Perforations	10.00			3450.00	
Bullnose	3.00			3453.00	59.00 Bottom Packers & Anchor
Total Tool Length:	121.00				



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Pfeifer Explorations, LLC

27-14s-16w Ellis,KS

309 W. 40th
Hays KS 67601

Schulte #27-1

Job Ticket: 49254

DST#: 1

ATTN: Roger Moses

Test Start: 2012.06.19 @ 04:15:31

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

35 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 44.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.79 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 7000.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
15.00	GO 15%G 85%O	0.074
105.00	GMCO 15%G 45%O 40%M	1.336
270.00	GO 15%G 85%O	3.787
0.00	210ft GIP	0.000

Total Length: 390.00 ft

Total Volume: 5.197 bbl

Num Fluid Samples: 0

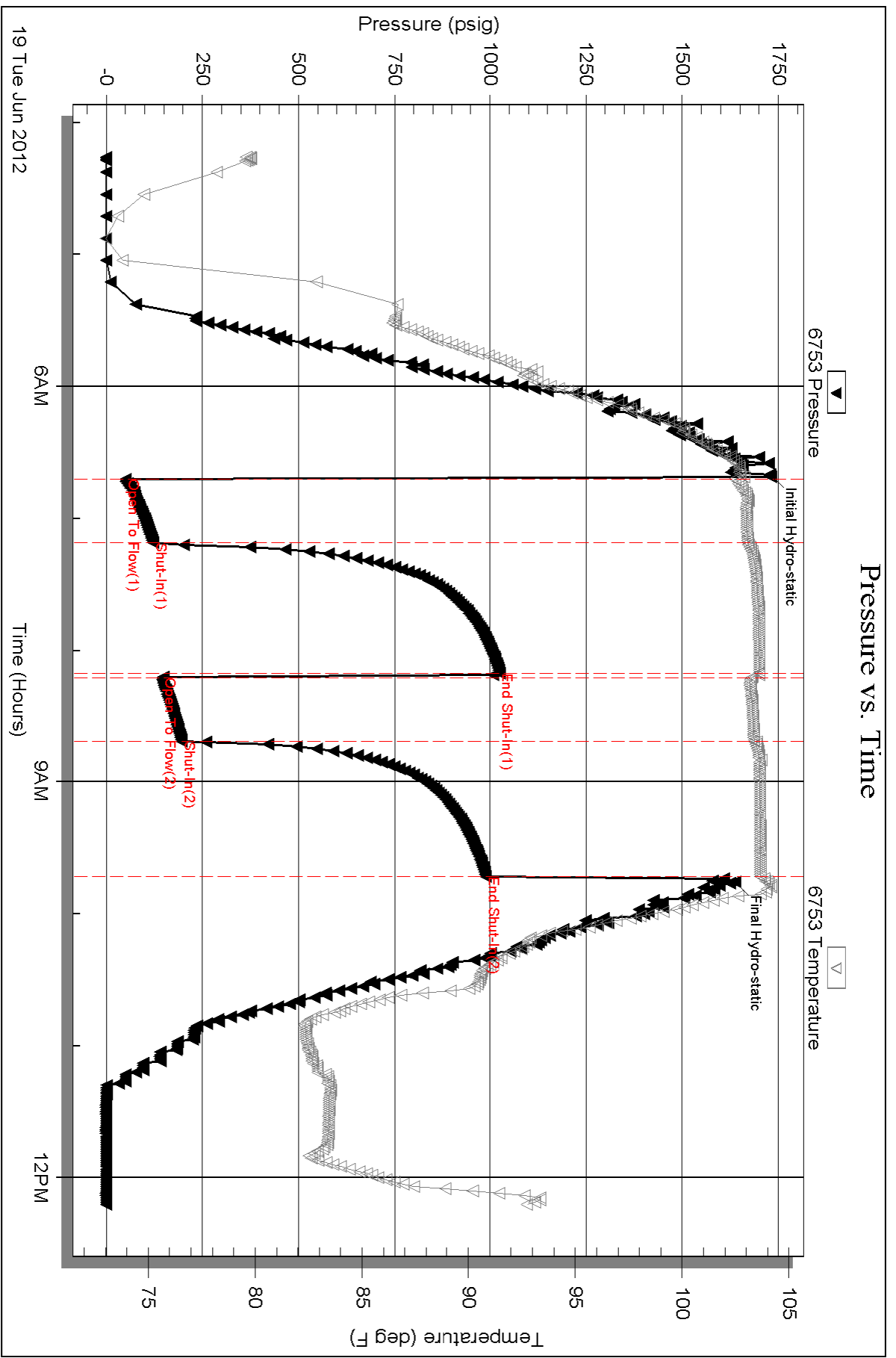
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



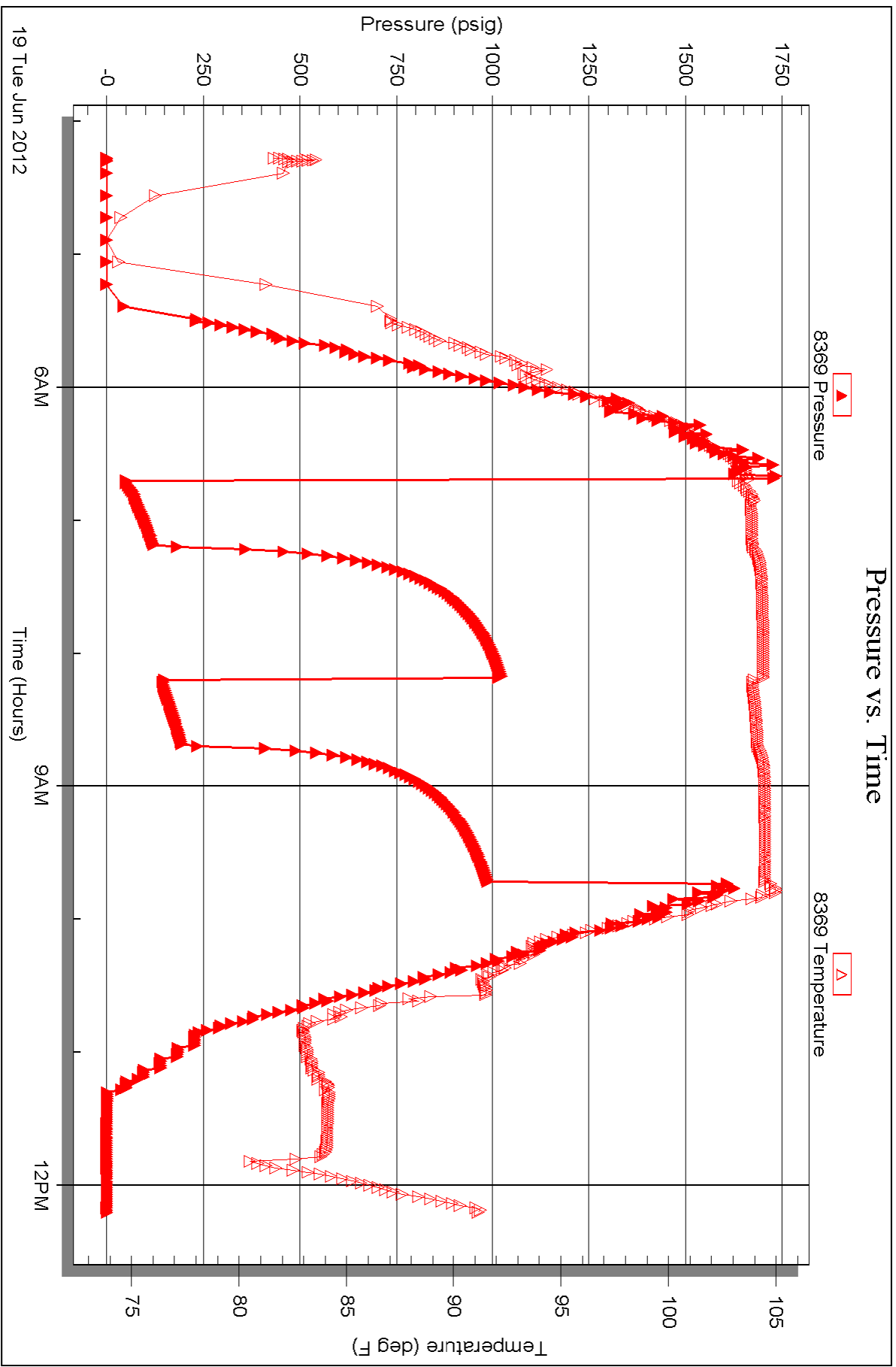
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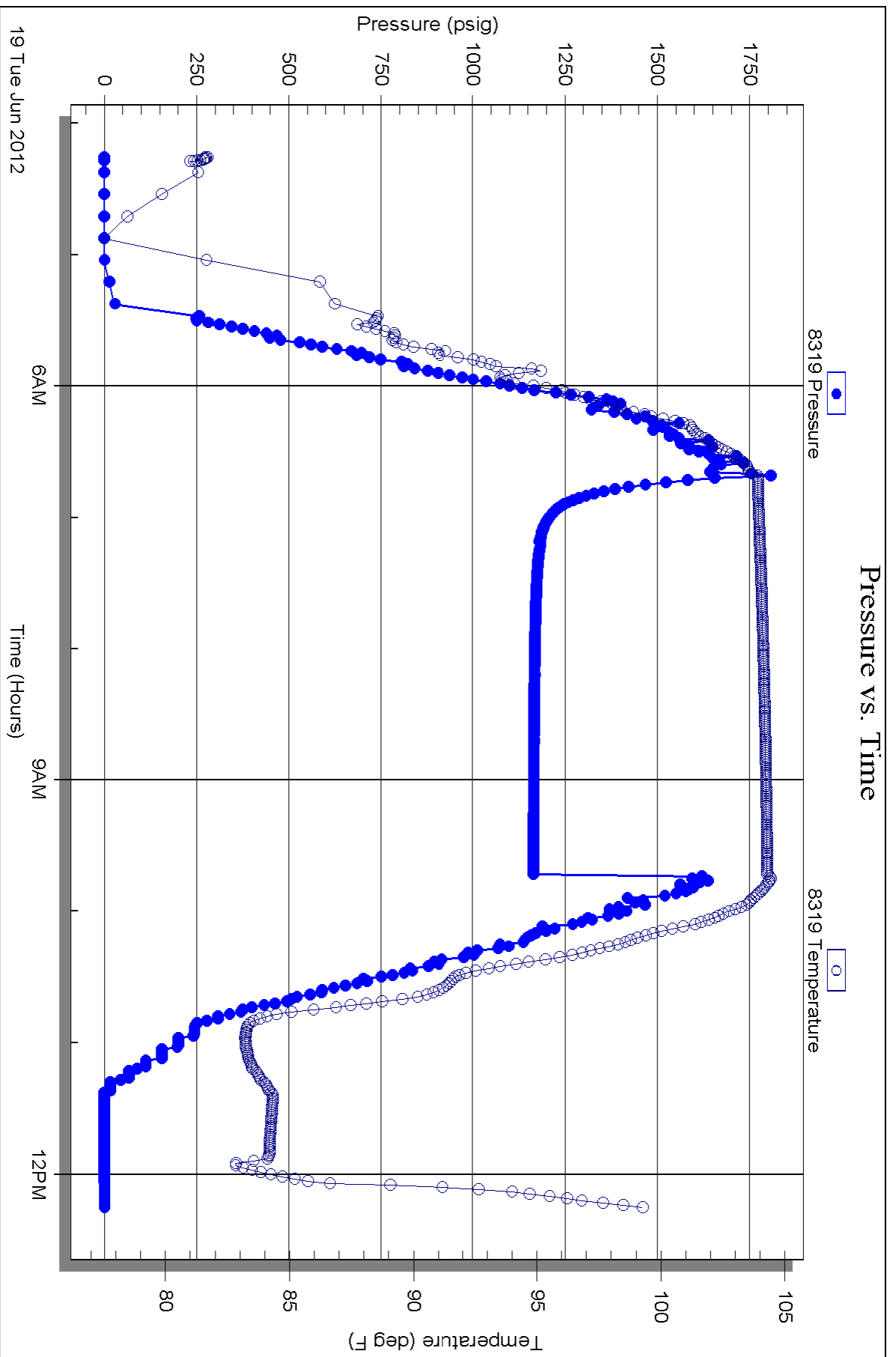
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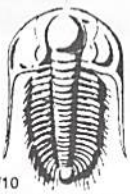
Feifer Explorations, LLC

Schulte #27-1

DST Test Number: 1







TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 49254

Well Name & No. Schulte #27-1 Test No. 1 Date 7/19/12
 Company Reiter Explorations, LLC Elevation 1867 KB 1857 GL
 Address 309 W. 40th Hays KS 67601
 Co. Rep / Geo. Roger Moses Rig Integrity #7
 Location: Sec. 27 Twp. 14s Rge. 16w Co. Ellis State KS

Interval Tested 3360 - 3394 Zone Tested Arbuckle
 Anchor Length 34 Drill Pipe Run 3311 Mud Wt. 9.1
 Top Packer Depth 3355, 3360 Drill Collars Run 30 Vis 44
 Bottom Packer Depth 3394 Wt. Pipe Run --- WL 8.8
 Total Depth 3450 Chlorides 7,000 ppm System LCM
 Blow Description IF - BOB in 5 min
ISF - 1 1/4 in blow
FF - BOB in 6 min
FSI - Lin blow died back to lin

Rec	Feet of	%gas	%oil	%water	%mud
15	60	15	85		
105	60 GMCO	15	45		40
270	60	15	85		
	210-ET GZP				
Rec Total	390	BHT	104	Gravity	35

(A) Initial Hydrostatic 1,729 Test 1150 T-On Location 4:00
 (B) First Initial Flow 50 Jars 250 T-Started 4:15
 (C) First Final Flow 122 Safety Joint 75 T-Open 6:45
 (D) Initial Shut-In 1,025 Circ Sub T-Pulled 9:45
 (E) Second Initial Flow 146 Hourly Standby T-Out 12:25
 (F) Second Final Flow 196 Mileage 32 ft x 2 99.20 Comments
 (G) Final Shut-In 989 Sampler
 (H) Final Hydrostatic 1,638 Straddle 600 Ruined Shale Packer
 Shale Packer Ruined Packer
 Extra Packer Extra Copies
 Extra Recorder Sub Total 0
 Day Standby Total 2174.20
 Accessibility MP/DST Disc't
 Sub Total 2174.20

Approved By _____ Our Representative Paul Durbin

Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

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 02, 2012

Jacob Pfeifer
Pfeifer Explorations, LLC
309 W. 40TH
HAYS, KS 67601

Re: ACO1
API 15-051-26319-00-00
Schulte 27-1
NE/4 Sec.27-14S-16W
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,
Jacob Pfeifer