



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1092035
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: _____



1092035

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: 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: <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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Landmark Resources, Inc.
Well Name	Frick 1-8
Doc ID	1092035

All Electric Logs Run

Dual Compensated Porosity Log
Borehole Compensated Sonic Log
Dual Induction Log
Sector Bond / Gamma CCL Log
Microresistivity Log

Form	ACO1 - Well Completion
Operator	Landmark Resources, Inc.
Well Name	Frick 1-8
Doc ID	1092035

Tops

Name	Top	Datum
Anhydrite	2416	682
B/Anhydrite	2431	665
Topeka	3744	-641
Heebner	3976	-878
Toronto	3995	-896
Lansing	4025	-919
C	4080	-957
D	4119	-1008
F	4137	-1030
Muncie Creek	4202	-1103
H	4205	-1114
I	4244	-1144
J	4277	-1182
Stark Shale	4297	-1198
K	4301	-1201
BKC	4384	-1282
Marmaton	4445	-1136
Altamont	4465	-1372
Pawnee	4513	-1419
Myrick Station	4556	-1459
Fort Scott	4571	-1472
Cherokee	4598	-1503
Johnson Zone	4645	-1545
Up Morrow Sand	4740	-1644

Form	ACO1 - Well Completion
Operator	Landmark Resources, Inc.
Well Name	Frick 1-8
Doc ID	1092035

Tops

Name	Top	Datum
Missippian	4768	-1669



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

PAID AUG 6 - 2012

#41740
60,696.37

INVOICE

Invoice Number: 131982
Invoice Date: Jul 17, 2012
Page: 1



APPROVED AUG 06 2012

Bill To:
Landmark Resources, Inc. 1616 S. Voss ST #150 Houston, TX 77057-1264

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Land	Frick #1-8	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Jul 17, 2012	8/16/12

Quantity	Item	Description	Unit Price	Amount
300.00	MAT	Class A Common	16.25	4,875.00
200.00	MAT	Pozmix	8.50	1,700.00
125.00	MAT	Flo Seal	2.70	337.50
701.43	SER	Cubic Feet	2.10	1,473.00
1,154.80	SER	Ton Mileage	2.35	2,713.78
1.00	SER	Production - Top Stage		
1.00	CEMENTER	Darren Racette		
1.00	EQUIP OPER	Tyler Flipse		
1.00	CEMENTER	Terry Heinrich		
1.00	OPER ASSIST	Adam Holcomb		

Subtotal		11,099.28
Sales Tax	11,673.02 +	573.74
Total Invoice Amount	2,219.85 -	11,673.02
Payment/Credit Applied	000	
TOTAL	9,453.17*	11,673.02

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$2219.85

ONLY IF PAID ON OR BEFORE
Aug 11, 2012

ALLIED OIL & GAS SERVICES, LLC 056240

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Oakley

DATE <u>7-17-12</u>	SEC. <u>8</u>	TWP. <u>17</u>	RANGE <u>33</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00 PM</u>	JOB FINISH <u>6:00 PM</u>
LEASE <u>Frack</u>	WELL # <u>1-8</u>	LOCATION <u>8324 Hwy Jct. SW</u>			COUNTY <u>Scott</u>	STATE <u>Ks.</u>	
OLD OR <u>NEW</u> (Circle one)		<u>1/2 S - E 1/4 S into</u>			1-02 8.3		

CONTRACTOR Murfin #2 OWNER Same

TYPE OF JOB Production Top stage

HOLE SIZE 7 7/8 T.D. 4906

CASING SIZE 4 1/2 DEPTH 2416

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DV DEPTH 2416

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 38.41

EQUIPMENT

CEMENT AMOUNT ORDERED 620 SKS Lite 1/4 # Flo seal

COMMON 300 SKS @ 16.25 = 4875.00

POZMIX 200 SKS @ 8.50 = 1700.00

GEL 50 @

CHLORIDE @

ASC @

Elo seal 125 # @ 2.70 = 337.50

PUMP TRUCK CEMENTER Darren Racette 1

423-281 HELPER Tyler Eclipse 2

BULK TRUCK

386-310 DRIVER Terry Heinrich 1

BULK TRUCK

396-306 DRIVER Adam Holcomb 3

HANDLING 701.43 x @ 2.10 = 1473.00

MILEAGE 2882 x 40 x @ 2.35 = 2713.28

TOTAL 11099.28

1154.80

REMARKS:

Plug mouse hole 15 SKS Cement

Plug Rat Hole 30 SKS Cement

mix 500 SKS Cement Release Plug

Displace with water Land Plug @ 1500'

Cement Dig Circulate.

Thank You

CHARGE TO: Landmark Resource 5

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

SALES TAX (If Any) 573.73

TOTAL CHARGES 11,099.28

DISCOUNT 20 2219.85 IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE M Walker

ALLIED

OIL & GAS SERVICES, LLC

PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

PAID AUG 3 - 2012

#41740
60,694.37

INVOICE

Invoice Number: 131981
Invoice Date: Jul 17, 2012
Page: 1



APPROVED AUG 06 2012

Bill To:
Landmark Resources, Inc.
1616 S. Voss
ST #150
Houston, TX 77057-1264

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Land	Frick #1-8	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Jul 17, 2012	8/16/12

Quantity	Item	Description	Unit Price	Amount
5.00	MAT	Gel	21.25	106.25
250.00	MAT	ASC	19.00	4,750.00
1,500.00	MAT	Gilsonite	0.89	1,335.00
24.00	MAT	Salt	23.95	574.80
500.00	MAT	Super Flush	1.27	635.00
339.72	SER	Cubic Feet	2.10	713.41
584.80	SER	Ton Mileage	2.35	1,374.28
1.00	SER	Production - Bottom Stage	2,405.00	2,405.00
40.00	SER	Pump Truck Mileage	7.00	280.00
1.00	SER	Manifold Head Rental	200.00	200.00
40.00	SER	Light Vehicle Mileage	4.00	160.00
1.00	EQP	4.5 Guide Shoe	192.00	192.00
1.00	EQP	4.5 AFU Insert	249.00	249.00
11.00	EQP	4.5 Centralizer	48.00	528.00
2.00	EQP	4.5 Basket	270.00	540.00
1.00	EQP	4.5 D V Tool	4,456.00	4,456.00
1.00	CEMENTER	Darren Racette		
1.00	EQUIP OPER	Tyler Flipse		
1.00	OPER ASSIST	Adam Holcomb		
1.00	OPER ASSIST	Brandon Wilkinson		
1.00	CEMENTER	Terry Heinrich		

APPROVED AUG 06 2012

0**

Subtotal		18,498.74
Sales Tax	19,608.12 * 12%	1,109.38
Total Invoice Amount	3,699.74 -	19,608.12
Payment/Credit Applied	000	
TOTAL	15,908.38 *	19,608.12

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 3699.74

ONLY IF PAID ON OR BEFORE
Aug 11, 2012



INVOICE

PO Box 93999
Southlake, TX 76092

PAID AUG 6 - 2012

Invoice Number: 131982

Invoice Date: Jul 17, 2012

Voice: (817) 546-7282
Fax: (817) 246-3361

#41740
60,696.37

Page: 1

Bill To:
Landmark Resources, Inc. 1616 S. Voss ST #150 Houston, TX 77057-1264

APPROVED AUG 06 2012



Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Land	Frick #1-8	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Jul 17, 2012	8/16/12

Quantity	Item	Description	Unit Price	Amount
300.00	MAT	Class A Common	16.25	4,875.00
200.00	MAT	Pozmix	8.50	1,700.00
125.00	MAT	Flo Seal	2.70	337.50
701.43	SER	Cubic Feet	2.10	1,473.00
1,154.80	SER	Ton Mileage	2.35	2,713.78
1.00	SER	Production - Top Stage		
1.00	CEMENTER	Darren Racette		
1.00	EQUIP OPER	Tyler Flipse		
1.00	CEMENTER	Terry Heinrich		
1.00	OPER ASSIST	Adam Holcomb		

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$2219.85

ONLY IF PAID ON OR BEFORE
Aug 11, 2012

Subtotal		11,099.28
Sales Tax	11,673.02 +	573.74
Total Invoice Amount	2,219.85 -	11,673.02
Payment/Credit Applied	000	
TOTAL	9,453.17 *	11,673.02

SENT TO CHECK 7/23/12



INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 131863

Invoice Date: Jul 8, 2012

Voice: (817) 546-7282
Fax: (817) 246-3361

Page: 1

Bill To:
Landmark Resources, Inc. 1616 S. Voss ST #150 Houston, TX 77057-1264


71730



APPROVED JUL 23 2012

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Land	Frick #1-8	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Oakley	Jul 8, 2012	8/7/12

Quantity	Item	Description	Unit Price	Amount
190.00	MAT	Class A Common	16.25	3,087.50
7.00	MAT	Chloride	58.20	407.40
199.52	SER	Cubic Feet	2.10	418.99
367.96	SER	Ton Mileage	2.35	864.71
1.00	SER	Surface	1,125.00	1,125.00
40.00	SER	Pump Truck Mileage	7.00	280.00
40.00	SER	Light Vehicle Mileage	4.00	160.00
1.00	CEMENTER	Alan Ryan		
1.00	EQUIP OPER	Wayne McGhghy		
1.00	OPER ASSIST	Jeremy Sterger		


 JUL 31 2012
 #
 41656
 \$5,364.96

6,633.68*
 1,260.72-
 000
 5,364.96*

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF
 \$ 1268.72
 ONLY IF PAID ON OR BEFORE
 Aug 2, 2012

Subtotal	6,343.60
Sales Tax	290.08
Total Invoice Amount	6,633.68
Payment/Credit Applied	
TOTAL	6,633.68

\$ 5,364.96

ALLIED

OIL & GAS SERVICES, LLC

INVOICE

PO Box 93999
Southlake, TX 76092

PAID AUG 3 - 2012

Invoice Number: 131981

Invoice Date: Jul 17, 2012

Voice: (817) 546-7282
Fax: (817) 246-3361

#41740
60,694.37

Page: 1



Bill To:
Landmark Resources, Inc. 1616 S. Voss ST #150 Houston, TX 77057-1264

APPROVED AUG 06 2012

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Land	Frick #1-8	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Jul 17, 2012	8/16/12

Quantity	Item	Description	Unit Price	Amount
5.00	MAT	Gel	21.25	106.25
250.00	MAT	ASC	19.00	4,750.00
1,500.00	MAT	Gilsonite	0.89	1,335.00
24.00	MAT	Salt	23.95	574.80
500.00	MAT	Super Flush	1.27	635.00
339.72	SER	Cubic Feet	2.10	713.41
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2.00	EQP	4.5 Basket	270.00	540.00
1.00	EQP	4.5 D V Tool	4,456.00	4,456.00
1.00	CEMENTER	Darren Racette		
1.00	EQUIP OPER	Tyler Flipse		
1.00	OPER ASSIST	Adam Holcomb		
1.00	OPER ASSIST	Brandon Wilkinson		
1.00	CEMENTER	Terry Heinrich		

APPROVED AUG 06 2012

0 * *

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 3699.74

ONLY IF PAID ON OR BEFORE
Aug 11, 2012

Subtotal		18,498.74
Sales Tax	19,608.12 * 12%	1,109.38
Total Invoice Amount	19,608.12 * 74%	19,608.12
Payment/Credit Applied	000	
TOTAL	19,608.12 * 38%	19,608.12

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
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

October 04, 2012

Jeff Wood
Landmark Resources, Inc.
1616 S VOSS RD STE 600
HOUSTON, TX 77057-2641

Re: ACO1
API 15-171-20886-00-00
Frick 1-8
NW/4 Sec.08-17S-33W
Scott 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,
Jeff Wood