

Confiden	tiality Requested:
Yes	No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1094396

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:			SecTwpS. R East West		
Address 2:			Feet	from \square North / \square South Line of Section	
City: St	ate: Ziŗ	D:+	Feet	from East / West Line of Section	
Contact Person:			Footages Calculated from Ne	arest Outside Section Corner:	
Phone: ()			□ NE □ NW	□ SE □ SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				. xx.xxxxx) (e.gxxx.xxxxx)	
Wellsite Geologist:			Datum: NAD27 NAD27		
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	Well #:	
☐ New Well ☐ Re-Entry ☐ Workover			Field Name:		
			Producing Formation:		
☐ Oil ☐ WSW	SWD	SIOW	Elevation: Ground:	Kelly Bushing:	
☐ Gas ☐ D&A ☐ OG	☐ ENHR	☐ SIGW ☐ Temp. Abd.	Total Vertical Depth:	Plug Back Total Depth:	
CM (Coal Bed Methane)	G3W	Temp. Abd.	Amount of Surface Pipe Set a	and Cemented at: Feet	
Cathodic Other (Core, Expl., etc.):			Multiple Stage Cementing Co		
If Workover/Re-entry: Old Well Inf				Feet	
Operator:				nent circulated from:	
Well Name:			, ,	w/sx cmt.	
Original Comp. Date:			loot doparto.	W,	
	_	NHR Conv. to SWD			
Deepening Re-perf. Plug Back	Conv. to GS		Drilling Fluid Management F (Data must be collected from the		
Commingled	Permit #:		Chloride content:	ppm Fluid volume: bbls	
Dual Completion	Permit #:		Dewatering method used:		
SWD	Permit #:		Location of fluid disposal if ha	uled offsite:	
☐ ENHR	Permit #:		On and an Name		
GSW Permit #:					
				License #:	
Spud Date or Date Rea	iched TD	Completion Date or		TwpS. R	
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



Operator Name:				_ Lease I	Name: _			Well #:	
Sec Twp	S. R	East	West	County	:				
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in press o surface test, along v	ures, whe	ther shut-in pre chart(s). Attach	ssure reac extra shee	hed stati	c level, hydrosta space is neede	tic pressures, b	ottom hole temp	erature, fluid recov
Final Radioactivity Lo files must be submitted						ogs must be ema	liled to kcc-well-	logs@kcc.ks.go	v. Digital electronic
Drill Stem Tests Taker (Attach Additional		Y	es No			J	on (Top), Depth		Sample
Samples Sent to Geo	logical Survey	Y	es No		Nam	е		Тор	Datum
Cores Taken Electric Log Run			es No						
List All E. Logs Run:									
				RECORD	Ne				
	0: 11.1					ermediate, product		" 0 1	T 15
Purpose of String	Size Hole Drilled		ze Casing t (In O.D.)	Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and Percer Additives
			ADDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD			
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used		Type and	Percent Additives	
Perforate Protect Casing	Top Dottern								
Plug Back TD Plug Off Zone									
1 lug 0 li 20 lio									
Did you perform a hydrau	ulic fracturing treatment	on this well	?			Yes	No (If No, s	skip questions 2 a	nd 3)
Does the volume of the t			-		-		_ ` `	skip question 3)	
Was the hydraulic fractur	ing treatment informatio	n submitted	to the chemical of	disclosure re	gistry?	Yes	No (If No, 1	ill out Page Three	of the ACO-1)
Shots Per Foot			RD - Bridge Plug Each Interval Perl				cture, Shot, Ceme	nt Squeeze Recor	rd Depth
						(* *			200
TUBING RECORD:	Size:	Set At:		Packer A	t·	Liner Run:			
		0017111				[Yes N	o	
Date of First, Resumed	Production, SWD or EN	HR.	Producing Meth	nod:	g 🗌	Gas Lift (Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	er B	bls.	Gas-Oil Ratio	Gravity
DIODOCITI	01.05.040			4ETUOD 05	. 00145/	TION:		DDOD! ICT!	
DISPOSITION Solo	ON OF GAS: Used on Lease		N Open Hole	∥ETHOD OF Perf.			nmingled	PRODUCTION	ON INTERVAL:
	bmit ACO-18.)		Other (Specify)		(Submit		mit ACO-4)		

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/

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

September 22, 2012

Chris Martin Tailwater, Inc. 6421 AVONDALE DR STE 212 OKLAHOMA CITY, OK 73116-6428

Re: ACO1 API 15-003-25534-00-00 Simons Bros. Farms 25-T NW/4 Sec.27-20S-20E Anderson 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, Chris Martin



CONSOLIDATED OIL Well Services, LLC

TICKET NUMBER 37576

LOCATION O + + a w q

FOREMAN Alan Made

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

FIELD TICKET & TREATMENT REPORT CEMENT

S-IL-1 7806 SIMON Dros 25 T New 2 December 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DATE	CUSTOMER#	WELL NAME		SECTION	TOWNSHIP	RANGE	COUNTY
TRUCKS ORNER TRUCKS DEVICED TRUCKS DEVICED TO THE TRUCKS DEVICED T	8-16-12	7806	Simon B	105 25 Y	NW 27		70	COUNTY
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DKIANONG CITY OK 33/16 JOB TYPE [DUG STANG HOLE SIZE JB HOLE SIZE JB HOLE DEPTH BELL CASING SIZE & WEIGHT JB DOBLYPE [DUG STANG SIZE & WEIGHT JB TUBING OTHER SLURRY WEIGHT SLURRY WOL WATER SAILS CEMENT LET IN CASING Y 25 SILURRY WIGHT SLURRY WOL WATER SAILS CEMENT LET IN CASING Y 25 DISPLACEMENT 5 DISPLACEMENT PS BOD MIX PS 2DD RATE 5 bpm REMARKS: Hold Crew Most Established Nate Mixed 5 pm 35 LID # 3cl followed by 15 SK 5D 15D Coment flus JB 502 LID # 3cl followed by 15 SK 5D 15D Coment flus JB 502 LID WALL REMARKS TO WALL HELD BOD 15T. Set floor CIDSE NOTICE TOTAL ACCOUNT CODE QUANTY OF UNITS DESCRIPTION OF SERVICES OF PRODUCT UNIT PRICE TOTAL THOU PUMP CHARGE STUDE 25 MILEAGE STUDE 26 BD UGC LIBY 115 SO15D Coment 10512 SALESTAX 105120 ESTHANTON WHAT TOTAL 113/15 30/5D Coment 10512 SALESTAX 105120 ESTHANTON WHAT TOTAL 113/15 30/5D Coment 10512 SALESTAX 105120 ESTHANTON WHAT TOTAL 113/15 31/3.98	CITY	112 000 00 00	STATE ZIP CO	DDE -	666	gar Moo	GM	
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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.

252135



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083 Fax: 913-557-9084

Paola, KS 66071

WELL LOG

Tailwater, Inc. Simons Bros. Farms #25-T API#15-003-25,534 August 15 - August 16, 2012

Thickness of Strata	<u>Formation</u>	<u>Total</u>
14	soil & clay	14
4	clay & gravel	18
63	shale	81
30	lime	111
61	shale	172
10	lime	182
6	shale	188
36	lime	224
7	shale	231
25	lime	256
3	shale	259
17	lime	276
179	shale	455
3	lime	458
7	shale	465
9	lime	474 oil show
7	shale	481
9	oil sand	490 green, light bleeding
1	coal	491
29	shale	520
1	coal	521
4	shale	525
4	lime	529
18	shale	547
4	lime	551
17	shale	568
5	lime	573
52	shale	625
5	broken sand	630 brown & green sand
34	shale	664
1	lime & shells	665 671 brown, good bleeding
6	oil sand	
47	shale	718 735 brown & grey, ok bleeding
17	broken oil sand	
14	shale	749 753 brown & grey, good bleeding
4	broken sand	
18	shale	771

Simon Bros. Farms #25-T

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7	broken sand	778 brown & grey, good bleeding
28	shale	806
5	oil sand	811 brown, good bleeding
3	sand	814 brlack & white, no oil show
47	shale	861

Drilled a 9 7/8" hole to 21'
Drilled a 5 5/8" hole to 861'

Set 21' of 7" surface casing cemented with 6 sacks of cement.

Set 851' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.