



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1095740
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: _____



1095740

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	White Exploration, Inc.
Well Name	Oldham 1
Doc ID	1095740

All Electric Logs Run

Density Neutron Log
Dual induction Log
Micro Log
Sonic Log



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

White Exploration Inc
2400 Woodlaw n Ste 115
Wichita KS 67220
ATTN: Tom Robinson

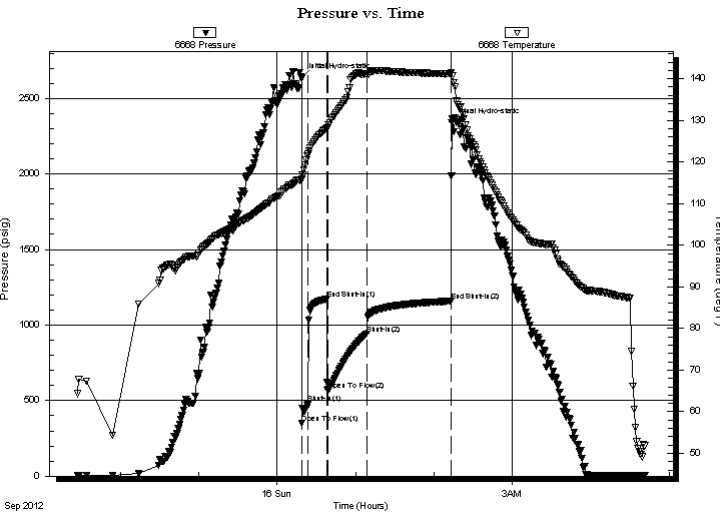
22-18S-28W-Wichita
Oldham #1
Job Ticket: 50015 **DST#: 1**
Test Start: 2012.09.15 @ 21:26:54

GENERAL INFORMATION:

Formation: **Lower Morrow Sand**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 00:18:54
Time Test Ended: 04:41:09
Interval: **5055.00 ft (KB) To 5100.00 ft (KB) (TVD)**
Total Depth: 5100.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Fair
Test Type: Conventional Bottom Hole (Initial)
Tester: Tate Lang
Unit No: 65
Reference Elevations: 3405.00 ft (KB)
3394.00 ft (CF)
KB to GR/CF: 11.00 ft

Serial #: 6668 Outside
Press @ Run Depth: 943.47 psig @ 5061.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2012.09.15 End Date: 2012.09.16 Last Calib.: 2012.09.16
Start Time: 21:27:09 End Time: 04:41:09 Time On Btm: 2012.09.16 @ 00:18:24
Time Off Btm: 2012.09.16 @ 02:13:24

TEST COMMENT: IF-B.O.B. in 1 1/2mins.
ISI-Bled Off For 5mins- Weak Surface Blow Built to 1/4in. And Stayed
FF-B.O.B. in 1 1/2mins.
FSI-Bled Off For 5mins- Dead No Return Blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2634.92	115.63	Initial Hydro-static
1	350.65	115.88	Open To Flow (1)
6	480.99	122.03	Shut-In(1)
20	1172.31	128.21	End Shut-In(1)
20	569.38	128.29	Open To Flow (2)
50	943.47	141.19	Shut-In(2)
115	1157.95	141.17	End Shut-In(2)
115	2341.32	141.37	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1953.00	2%M 98%W	25.25
365.00	40%W 60%M	5.12
0.00	2300 GIP	0.00

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

White Exploration Inc

22-18S-28W-Wichita

2400 Woodlaw n Ste 115
Wichita KS 67220

Oldham #1

Job Ticket: 50015

DST#: 1

ATTN: Tom Robinson

Test Start: 2012.09.15 @ 21:26:54

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

32000 ppm

Viscosity: 63.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.97 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 2200.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
1953.00	2%M 98%W	25.255
365.00	40%W 60%M	5.120
0.00	2300 GIP	0.000

Total Length: 2318.00 ft Total Volume: 30.375 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

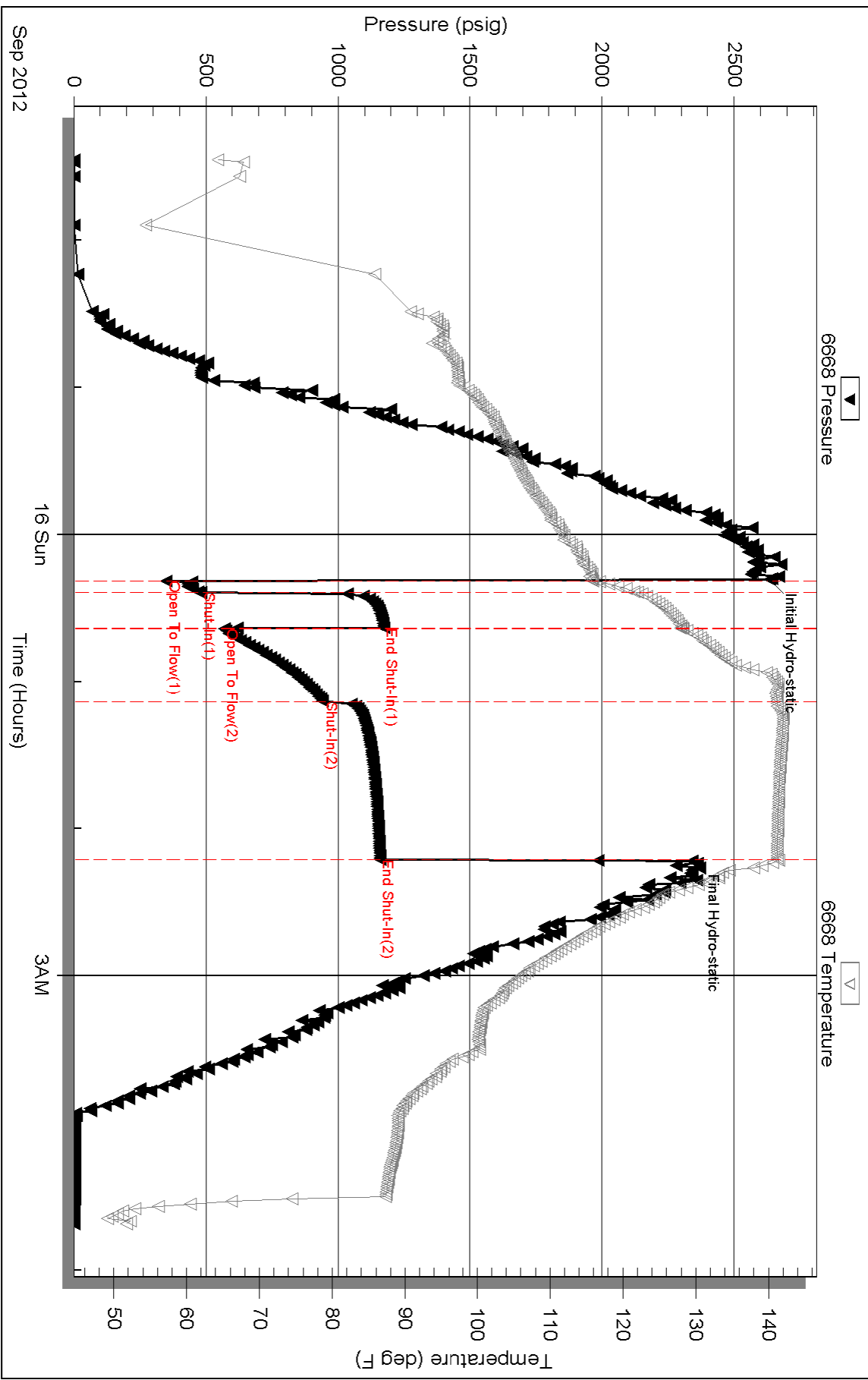
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: 10# LCM in the hole. No sampler run

Pressure vs. Time





CONSOLIDATED
OIL WELL SERVICES, LLC

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

FIELD TICKET & TREATMENT REPORT

TICKET NUMBER **37196**
LOCATION **Dakota KS**
FOREMAN **Walt Dunkel**

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-9-12	8860	Oldham #1	22	183	384	Wichita
CUSTOMER	MAILING ADDRESS		TRUCK #	DRIVER	TRUCK #	DRIVER
White Explorations	Leoti, KS		399	Damon Miller		
		S.S.	460	Les Klein		
CITY	STATE	ZIP CODE				

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 356' CASING SIZE & WEIGHT 8 5/8" -

CASING DEPTH 356' DRILL PIPE _____ TUBING _____ OTHER _____

SLURRY WEIGHT 1512 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 5 BBL

DISPLACEMENT 21 3/4 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Safety Meeting - vic up on Murtin #2, give on bottom
Mix 240 sils com, 3% dc-3% talc, Displace 21 3/4 BBL H2O - Station

Cement Did Cure
Approx 6 BBL to Pt

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE	1085 ⁰⁰	1085 ⁰⁰
5406	50	MILEAGE	5 ⁰⁰	250 ⁰⁰
11048	240		17 ⁶⁵	4236 ⁰⁰
1102	678 ^{##}		1 ⁸⁹	6034 ²
118B	452 ^{##}		1 ²⁵	1130 ⁰⁰
5407A	11.28		1 ⁶⁴	940 ⁰⁰

SALES TAX ESTIMATED TOTAL	DATE
6,506 ⁹⁵	
369 ⁹⁵	
7,228 ⁴²	
722 ²⁴	
1876 ⁴³	

AUTHORIZATION _____ 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.

252653



TICKET NUMBER **37200**
 LOCATION **Dallas, KS**
 FOREMAN **Walt Dinkel**

PO Box 884, Chanute, KS 66720
 820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
9-17-12	8860	Oildham #1		22	185	38w	Wichita
CUSTOMER	White Explorations			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS				399	Damon Miller		
CITY	STATE	ZIP CODE	Leath 8w S.S.	528-7127	Mes Egan		

JOB TYPE **PTA** HOLE SIZE **7 1/8"** HOLE DEPTH **5196'** CASING SIZE & WEIGHT
 CASING DEPTH _____ DRILL PIPE **4 1/2" XH** TUBING _____ OTHER _____
 SLURRY WEIGHT **13.6** SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____
 REMARKS: **Safety Meetings, Rig up on Muffin #2, Plug as ordered**

50 SKS @ 2490'
 80 SKS @ 1530'
 50 SKS @ 390'
 20 SKS @ 60'
 30 SKS in RH
 20 SKS in M.H.

250 SKS 6 1/2" per, 4 1/2" seal, 1/4" #10-seal

3:30

*Thank You
Walt & crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	PUMP CHARGE	MILEAGE	UNIT PRICE	TOTAL
5405N	1				1325.00	1,325.00
5406	50				5.00	250.00
1131	250 SKS	6 1/2" per			15.10	3,775.00
118B	860 #	6el			.25	215.00
1107	63 #	Flt-Sec 1			2.82	177.66
5407A	10.75	Ten Mileago Delivery			1.67	897.50
WALTON COMPUTER						
					SALES TAX	616.4816
					ESTIMATED TOTAL	6,649.22
						5,976.19
						311.34
						1,287.48

AUTHORIZATION _____ 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.

0520974

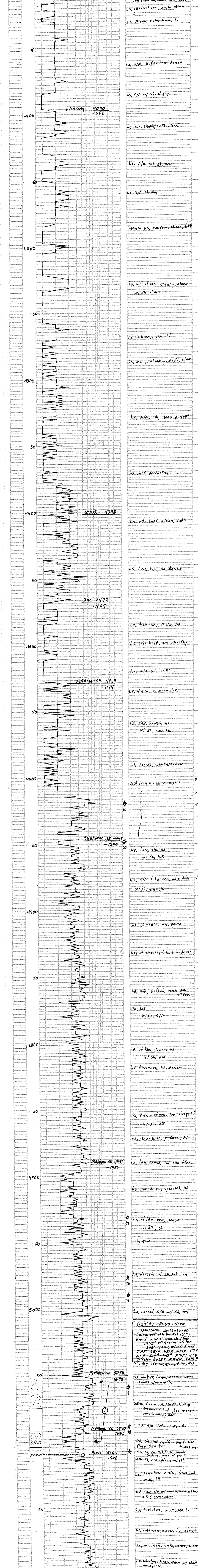
GEOLOGICAL REPORT

DRILLING TIME
AND
SAMPLE LOG

COMPANY: **WHITE EXPLORATION, INC.**
 LEASE: **Oldham** WELL NO: **1**
 FIELD: **W. Leaf** DEPTH: **394** FEET
 LOCATION: **985 FN., 1815 FN.** MEASUREMENTS AND ALL FROM **KB**
 SECTION: **22** TOWNSHIP: **18S** RANGE: **88W**
 COUNTY: **Wichita** STATE: **KANSAS**
 CONTRACTOR: **MARFEN DRILLING CO., INC.** NO. **2**
 COMMENCED DRILLING: **9/9/12 (4:30 PM)**
 COMPLETED DRILLING: **9/16/12 (4:00 PM)**
 RIG: **5196** FEET: **5195** FEET
 MUD: **at 3100** FEET MUD TYPE: **Chemical**
 MUD UP AT: **3100** FEET MUD TYPE: **Chemical**
 SAMPLES SAVED FROM: **3950** FEET TO **TD** FEET
 DRILLING TIME: **4000** FEET TO **TD** FEET
 SAMPLES EXAMINED FROM: **4000** FEET TO **TD** FEET
 GEOLOGICAL SUPERVISION FROM: **4610** FEET TO **TD** FEET
 GEOLOGIST: **TOM G. ROBINSON**
 NOTES: **Earth Tech gas detector**
pulled PDC bit @ 4610'

ELEVATIONS: **KB 3405** FEET
DF 394 FEET
MEASUREMENTS AND ALL FROM KB
 LANSING: **4090** FEET
4090 - 685
 STARK: **4398** FEET
4398 - 1047
 BKC: **4492** FEET
4492 - 1047
 MARMATON: **4519** FEET
4519 - 1114
 CHEROKEE SR: **4695** FEET
4695 - 1240
 MORROW SH: **4891** FEET
4891 - 1406
 MORROW SD: **5048** FEET
5048 - 1643
 MORROW SD: **5090** FEET
5090 - 1685
 MISS: **5107** FEET
5107 - 1702
 DRILLER: **TD 5196**
LOG: TD 5195

LITHOLOGY DEPTH: **4000** FEET TO **5200** FEET
 DRILLING TIME (Logarithmic Scale): **5** to **30** MINUTES
 LITHOLOGIC DESCRIPTION: **LITHOLOGIC DESCRIPTION**
 REMARKS: **REMARKS**



A/A = as above
*** gas shows lagged to drilling time interval log tops adjusted to drilling time**
Lansing 4090 - 685
 Ls, buff-tan, dense, clean
 Ls, ft-tan, p. xln dense, hd
 Ls, A/A buff-tan, dense
 Ls, A/A w/ sh, ft gry
 Ls, wh, chunky soft clean
 Ls, A/A w/ sh, gry
 Ls, A/A chunky
 mostly Ls, tan/wh, clean, soft
 Ls, wh-ft tan, chunky, clean w/ sh ft gry
 Ls, drk gry, xln, hd
 Ls, wh, p. chunky, soft, clean
 Ls, A/A, wh, clean, p. soft
 Ls, buff, oolitic
Stark 4398 - 1047
 Ls, wh-buff, clean, soft
 Ls, tan, xln, hd dense
BKC 4492 - 1047
 Ls, tan-gry, p. xln, hd
 Ls, wh-buff, some chunky
 Ls, A/A wh, soft
Marmaton 4519 - 1114
 Ls, ft gry, p. granular
 Ls, tan, dense, hd w/ sh, some blk
 Ls, varieg, wh-buff-tan
Cherokee SR 4695 - 1240
 Bit trip - poor samples
 Bit trip - pulled PDC bit
 host 2000 lbs mud
 Trip gas?
 Ls, tan, xln, hd w/ sh, blk
 Ls, A/A c Ls brn, hd p. foss tested gas detector @ 4694' OK
 w/ sh, gry-blk
 Ls, wh-buff-tan, dense
 Ls, wh, chunky, c Ls buff, dense
 Ls, A/A, varieg, dense, some sil foss
 Sh, blk w/ Ls, A/A
 Ls, ft tan, dense, hd w/ sh, blk
 Ls, tan-gry, hd, dense
 Ls, tan-ft gry, some dirty, hd w/ sh, blk
 Ls, gry-brn, p. foss, hd
Morrow SH 4891 - 1406
 Ls, tan, dense, hd some foss
 Ls, brn, dense, speckled, hd
 Ls, ft tan, brn, dense w/ blk, sh
 Sh, gry
 Ls, varieg, w/ sh, blk, gry
 Ls, varieg, A/A w/ sh, gry
DST #1 - 5055 - 5100
 Open/close 5-15-30-60"
 (blow off bit bucket 1/2")
 Read 2300' gas in pipe
 1953' P gas cut water
 1953' gas 3 with cut mud
 I.F.P. 3.514, 4.81" I.S.P. 1172"
 F.F.P. 564" - 943" F.S.P. 1158"
 F.H.V.D. 2435" F.H.V.D. 2841"
 SS, gry, v. fine, glauc, r. xln, N/S
 SS, wh-buff, in qtz, w. com. clusters subseq. glauc. matrix
 SS, cl, f. med. qtz, clusters, qtz
 943 test @ 5072' OK
 subseq. sub. foss. ft tan? no clear-cut clay
 SS, A/A - lots of pyrite CFS 5088
 good gas kick
 CFS 5100
 Trip gas after DST #1 25-30 min. tested gas detector @ 5103' - OK (working)
 SS, cl, f. med. qtz, subseq. clusters, some r. xln?
 some ss, r. xln, glauc. and sil.
 Ls, tan-brn, p. xln, dense, hd w/ sh, blk
 Ls, tan, xln, w/ some rounded matrix blk i green shale
 Ls, buff-tan, oolitic, xln, hd
 Ls, buff-tan, clean, hd, dense
 Ls, wh-tan, mostly dense, clean
 Ls, wh-tan, dense, clean w/ chert and pyrite
Total Depth 5196 CFS
 Ls, tan, oolitic, p. xln, hd dense

SCALE: 8" = 100'
 22

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

November 30, 2012

Kenneth S. White
White Exploration, Inc.
2400 N WOODLAWN STE 115
WICHITA, KS 67220-3966

Re: ACO1
API 15-203-20185-00-00
Oldham 1
NW/4 Sec.22-18S-38W
Wichita 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,
Kenneth S. White