



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1097019
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: _____



1097019

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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Well Name: Hoffman Family Trust 1-18H

Contractor/Rig: Patterson-UTI 421

State: KS

County: Comanche

SHL: 200 FSL & 660 FEL

Township: 33S

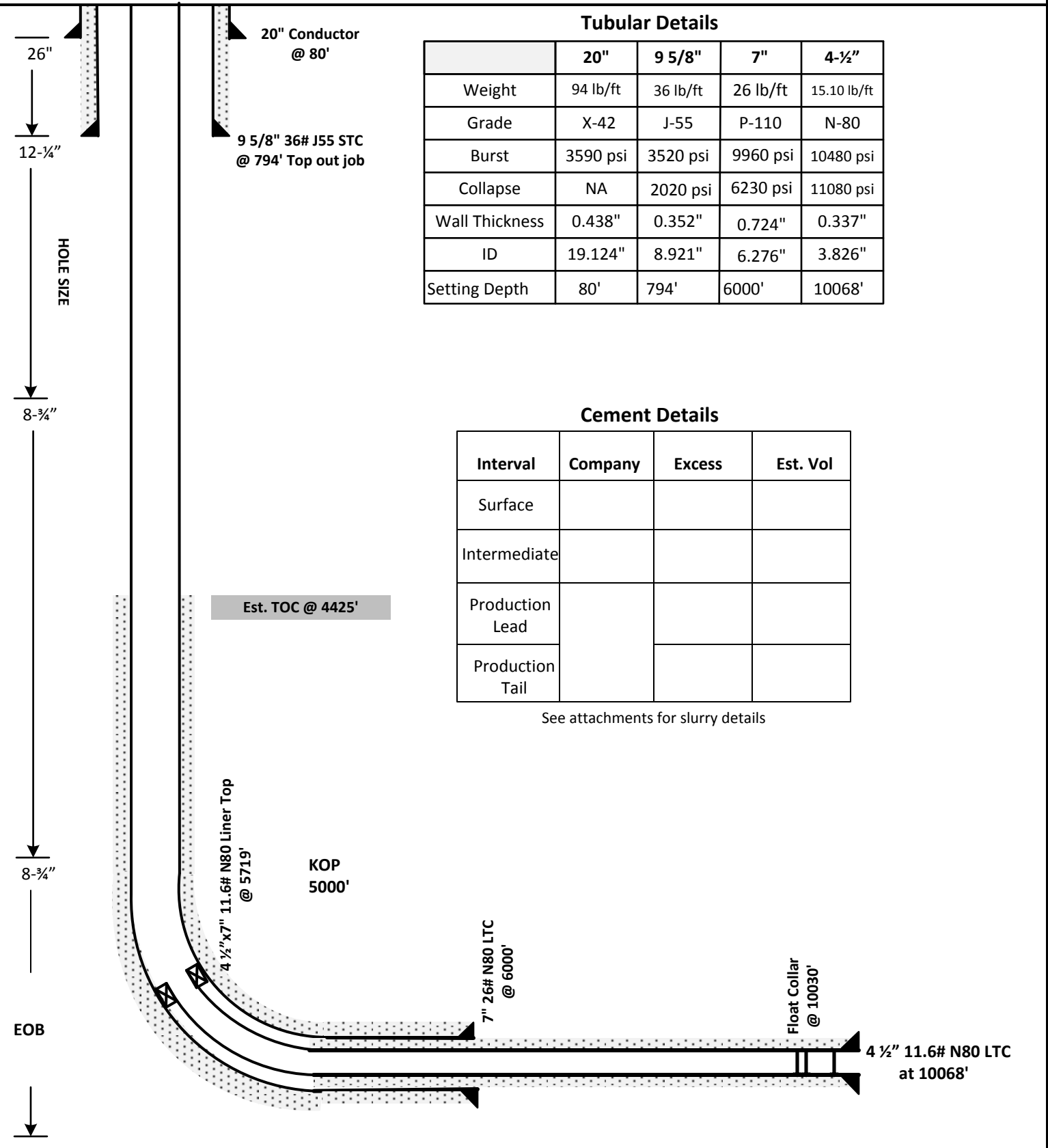
As Run

GL Elev: 1938 KB: 23 KB Elev: 1961

BHL: 330' FNL & 660' FEL

AFE: 12-0121

Permit/API Number: 15-033-21621-01-00



Tubular Details

	20"	9 5/8"	7"	4-1/2"
Weight	94 lb/ft	36 lb/ft	26 lb/ft	15.10 lb/ft
Grade	X-42	J-55	P-110	N-80
Burst	3590 psi	3520 psi	9960 psi	10480 psi
Collapse	NA	2020 psi	6230 psi	11080 psi
Wall Thickness	0.438"	0.352"	0.724"	0.337"
ID	19.124"	8.921"	6.276"	3.826"
Setting Depth	80'	794'	6000'	10068'

Cement Details

Interval	Company	Excess	Est. Vol
Surface			
Intermediate			
Production Lead			
Production Tail			

See attachments for slurry details



Tug Hill Operating LLC

Comanche County, Kansas

Sec 18, T34S, R18W

Hoffman Family Trust #1-18H

Original Wellbore

Design: Original Wellbore

Survey Report - Geographic

20 August, 2012





Survey Report - Geographic



Company:	Tug Hill Operating LLC	Local Co-ordinate Reference:	Site Sec 18, T34S, R18W
Project:	Comanche County, Kansas	TVD Reference:	Well @ 1961.0usft
Site:	Sec 18, T34S, R18W	MD Reference:	Well @ 1961.0usft
Well:	Hoffman Family Trust #1-18H	North Reference:	Grid
Wellbore:	Original Wellbore	Survey Calculation Method:	Minimum Curvature
Design:	Original Wellbore	Database:	EDM 5000.1 Single User Db

Project	Comanche County, Kansas		
Map System:	US State Plane 1927 (Exact solution)	System Datum:	Mean Sea Level
Geo Datum:	NAD 1927 (NADCON CONUS)		
Map Zone:	Kansas South 1502		

Site	Sec 18, T34S, R18W				
Site Position:		Northing:	150,552.88 usft	Latitude:	37° 4' 38.374 N
From:	Map	Easting:	1,764,027.77 usft	Longitude:	99° 18' 31.716 W
Position Uncertainty:	0.0 usft	Slot Radius:	13-3/16 "	Grid Convergence:	-0.50 °

Well	Hoffman Family Trust #1-18H					
Well Position	+N/-S	0.0 usft	Northing:	150,552.88 usft	Latitude:	37° 4' 38.374 N
	+E/-W	0.0 usft	Easting:	1,764,027.77 usft	Longitude:	99° 18' 31.716 W
Position Uncertainty		0.0 usft	Wellhead Elevation:	0.0 usft	Ground Level:	1,938.0 usft

Wellbore	Original Wellbore				
Magnetics	Model Name	Sample Date	Declination (°)	Dip Angle (°)	Field Strength (nT)
	IGRF2010	07/20/12	5.39	65.08	51,739

Design	Original Wellbore				
Audit Notes:					
Version:	1.0	Phase:	ACTUAL	Tie On Depth:	0.0
Vertical Section:	Depth From (TVD) (usft)	+N/-S (usft)	+E/-W (usft)	Direction (°)	
	0.0	0.0	0.0	261.14	

Survey Program	Date	08/20/12			
From (usft)	To (usft)	Survey (Wellbore)	Tool Name	Description	
100.0	4,863.0	Gyro Surveys (Original Wellbore)	NS-GYRO-SS	NS Gyro single shots	
4,922.0	10,070.0	MWD Surveys (Original Wellbore)	MWD	MWD - Standard	

Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Map Northing (usft)	Map Easting (usft)	Latitude	Longitude
0.0	0.00	0.00	0.0	0.0	0.0	150,552.88	1,764,027.77	37° 4' 38.374 N	99° 18' 31.716 W
Hoffman F T #1									
100.0	0.56	285.23	100.0	0.1	-0.5	150,553.01	1,764,027.30	37° 4' 38.375 N	99° 18' 31.722 W
First Gyro Survey									
200.0	0.39	296.05	200.0	0.4	-1.2	150,553.29	1,764,026.52	37° 4' 38.377 N	99° 18' 31.731 W
300.0	0.36	266.09	300.0	0.5	-1.9	150,553.42	1,764,025.90	37° 4' 38.379 N	99° 18' 31.739 W
400.0	0.42	340.74	400.0	0.9	-2.3	150,553.74	1,764,025.47	37° 4' 38.382 N	99° 18' 31.744 W
500.0	0.11	318.09	500.0	1.3	-2.5	150,554.16	1,764,025.28	37° 4' 38.386 N	99° 18' 31.747 W
600.0	0.52	281.62	600.0	1.4	-3.0	150,554.32	1,764,024.77	37° 4' 38.388 N	99° 18' 31.753 W
700.0	0.37	327.58	700.0	1.8	-3.6	150,554.69	1,764,024.16	37° 4' 38.391 N	99° 18' 31.761 W
800.0	0.36	307.01	800.0	2.3	-4.0	150,555.15	1,764,023.73	37° 4' 38.396 N	99° 18' 31.766 W



Survey Report - Geographic



Company:	Tug Hill Operating LLC	Local Co-ordinate Reference:	Site Sec 18, T34S, R18W
Project:	Comanche County, Kansas	TVD Reference:	Well @ 1961.0usft
Site:	Sec 18, T34S, R18W	MD Reference:	Well @ 1961.0usft
Well:	Hoffman Family Trust #1-18H	North Reference:	Grid
Wellbore:	Original Wellbore	Survey Calculation Method:	Minimum Curvature
Design:	Original Wellbore	Database:	EDM 5000.1 Single User Db

Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Map Northing (usft)	Map Easting (usft)	Latitude	Longitude
9,092.0	90.70	4.80	5,452.8	3,812.9	-22.0	154,365.75	1,764,005.76	37° 5' 16.068 N	99° 18' 32.396 W
9,187.0	90.70	4.80	5,451.6	3,907.5	-14.1	154,460.41	1,764,013.71	37° 5' 17.005 N	99° 18' 32.308 W
9,282.0	91.60	5.00	5,449.7	4,002.2	-5.9	154,555.04	1,764,021.83	37° 5' 17.941 N	99° 18' 32.218 W
9,376.0	92.70	5.40	5,446.2	4,095.7	2.6	154,648.58	1,764,030.34	37° 5' 18.867 N	99° 18' 32.123 W
9,470.0	90.40	4.60	5,443.6	4,189.3	10.8	154,742.19	1,764,038.53	37° 5' 19.793 N	99° 18' 32.032 W
9,566.0	90.20	4.40	5,443.1	4,285.0	18.3	154,837.89	1,764,046.06	37° 5' 20.740 N	99° 18' 31.949 W
9,660.0	90.60	4.40	5,442.5	4,378.7	25.5	154,931.61	1,764,053.27	37° 5' 21.667 N	99° 18' 31.870 W
9,756.0	91.90	5.50	5,440.4	4,474.3	33.8	155,027.22	1,764,061.55	37° 5' 22.613 N	99° 18' 31.778 W
9,851.0	90.40	5.20	5,438.5	4,568.9	42.6	155,121.79	1,764,070.41	37° 5' 23.549 N	99° 18' 31.679 W
9,945.0	90.70	4.30	5,437.6	4,662.6	50.4	155,215.46	1,764,078.19	37° 5' 24.476 N	99° 18' 31.593 W
10,019.0	91.50	4.50	5,436.2	4,736.3	56.1	155,289.23	1,764,083.87	37° 5' 25.205 N	99° 18' 31.531 W
Last MWD Survey 10019 MD/5436.2 TVD 4736.3 N 56.1 E N: 155289.22 E: 1764083.87									
10,029.6	91.50	4.50	5,435.9	4,746.9	56.9	155,299.80	1,764,084.70	37° 5' 25.310 N	99° 18' 31.522 W
CONT HLD 90.5° Inc.									
10,032.0	91.50	4.50	5,435.8	4,749.3	57.1	155,302.18	1,764,084.89	37° 5' 25.333 N	99° 18' 31.520 W
Cross 330' 10032 MD/4749.3 TVD 4749.3 N 57.1 E N: 155302.18 E: 1764084.89									
10,069.5	91.50	4.50	5,434.8	4,786.7	60.1	155,339.61	1,764,087.83	37° 5' 25.704 N	99° 18' 31.487 W
Hoffman F T #1-18H PBHL									
10,070.0	91.50	4.50	5,434.8	4,787.2	60.1	155,340.05	1,764,087.87	37° 5' 25.708 N	99° 18' 31.487 W
PTD 10070 MD/4787.2 TVD 4787.2 N 60.1 E N: 155340.05 E: 1764087.87									

Measured Depth (usft)	Vertical Depth (usft)	Local Coordinates		Comment
		+N/-S (usft)	+E/-W (usft)	
100.0	100.0	0.1	-0.5	First Gyro Survey
4,863.0	4,861.6	-12.0	-77.2	Last Gyro Survey
4,922.0	4,920.6	-12.7	-75.6	First MWD Survey
10,019.0	5,436.2	4,736.3	56.1	Last MWD Survey 10019 MD/5436.2 TVD 4736.3 N 56.1 E N: 155289.22 E: 1764083.87
10,032.0	5,435.8	4,749.3	57.1	Cross 330' 10032 MD/4749.3 TVD 4749.3 N 57.1 E N: 155302.18 E: 1764084.89
10,070.0	5,434.8	4,787.2	60.1	PTD 10070 MD/4787.2 TVD 4787.2 N 60.1 E N: 155340.05 E: 1764087.87

Checked By: _____ Approved By: _____ Date: _____

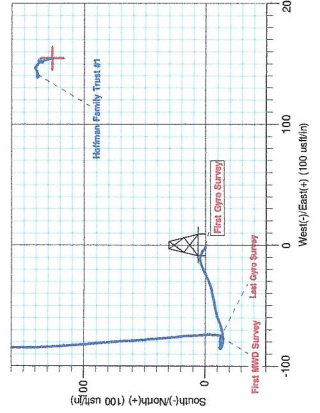
interp

Survey Interpolation Results

Well Name	:	Hoffman Family Trust #1-18H											
Wellbore Name	:	Original Wellbore								MAPN	MAPE	LAT	LONG
MD	INC	TVD	NS	EW	DLS	VS	MAPN	MAPE	LAT	LONG			
10019.0	91.50	5436.2	4736.3	56.1	1.11	-784.8	155289.22	37° 5' 25.205 N	99° 18' 31.531 W	1764083.87			
10032.0	91.50	5435.8	4749.3	57.1	0.00	-787.8	155302.18	37° 5' 25.333 N	99° 18' 31.520 W	1764084.89			
10070.0	91.50	5434.8	4787.2	60.1	0.00	-796.6	155340.05	37° 5' 25.708 N	99° 18' 31.487 W	1764087.87			



TUG HILL Operating LLC
 Project: Comstock County, Kansas
 Site: Sec 18, T24S, R18W
 Well: Hoffman Family Trust #1-18H
 Wellbore: Original Wellbore
 Design: Plan #5
 Lat: 37° 4' 38.374 N
 Long: 99° 18' 31.716 W
 Pad GL: 1936.0
 KB: Well @ 1961.0usft



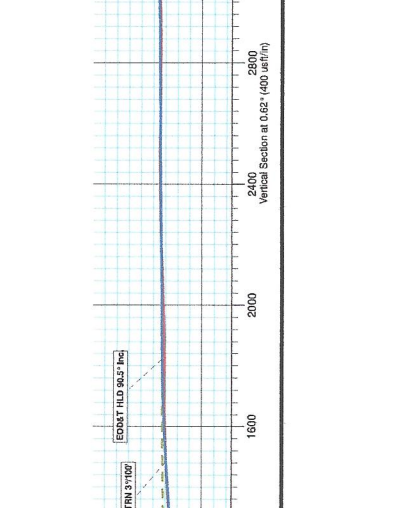
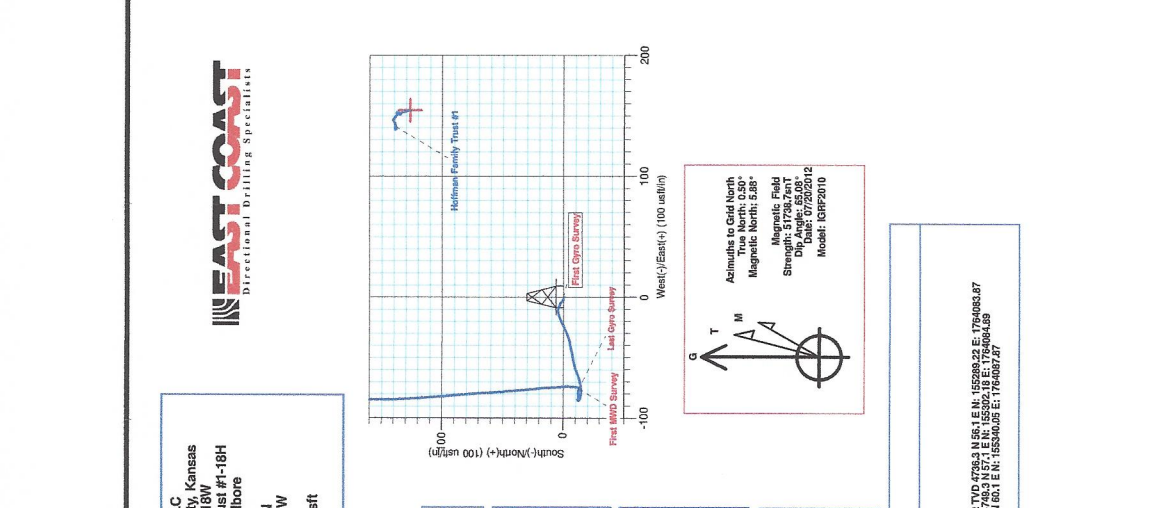
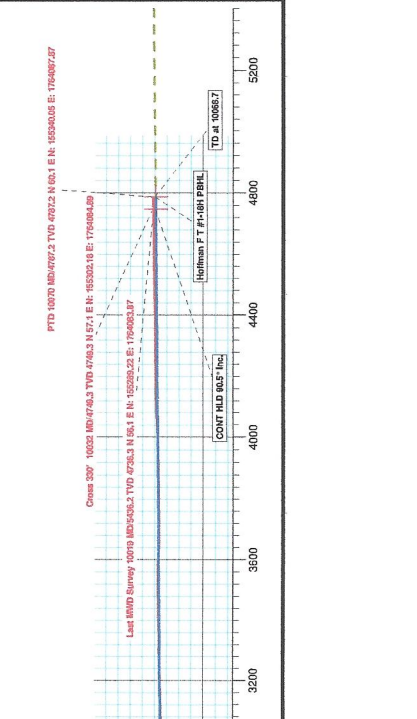
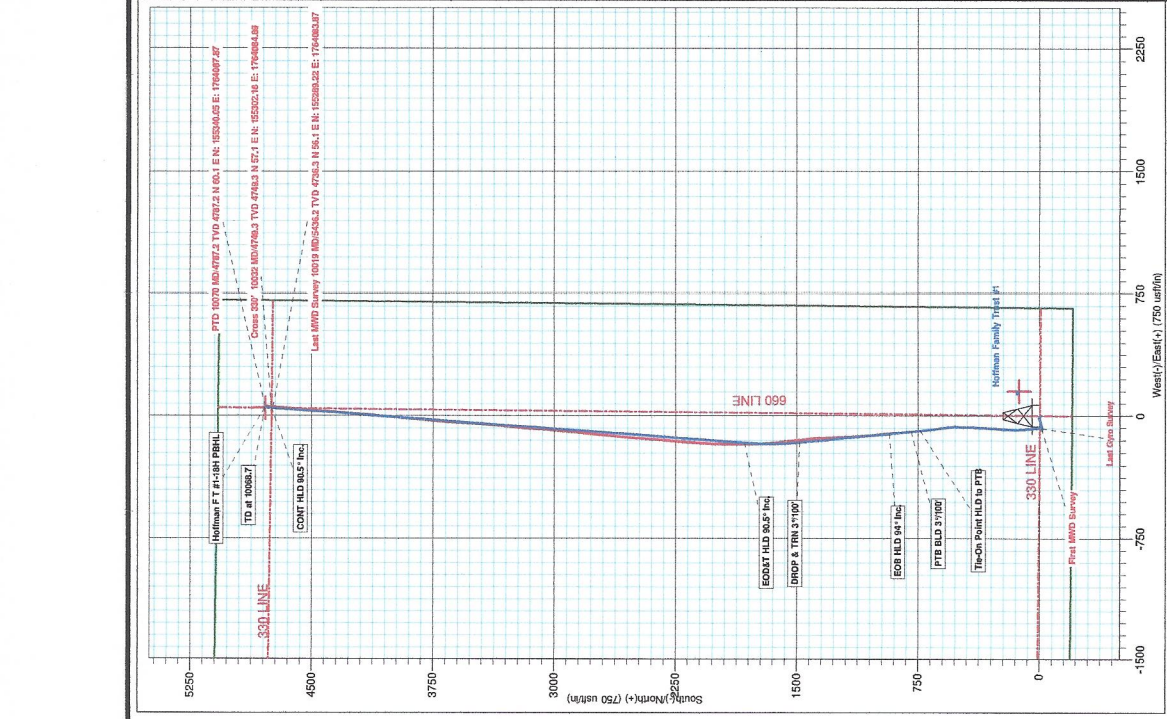
Azimuths to Grid North
 True North: 0.50°
 Magnetic North: 5.85°
 Magnetic Field
 Strength: 51762.7 nT
 Declination: 0.00°
 Date: 07/20/2012
 Model: IGRF2010

WELL DETAILS: Hoffman Family Trust #1-18H			
+N-S	+E-W	Ground Level	Longitude
0.0	0.0	1764027.77	99° 18' 31.716 W
WELLBORE TARGET DETAILS (LAT/LONG)			
MD	INC	ASL	LENGTH
6862.0	30.00	3545.00	552.4
6185.3	34.00	3545.00	552.4
7084.7	30.50	3541.7	548.3
10023.7	30.50	41.7	5443.3
10888.7	30.50	41.7	5443.3

SECTION DETAILS			
MD	INC	ASL	LENGTH
6862.0	30.00	3545.00	552.4
6185.3	34.00	3545.00	552.4
7084.7	30.50	3541.7	548.3
10023.7	30.50	41.7	5443.3
10888.7	30.50	41.7	5443.3

FORMATION TOP DETAILS			
TVDPath	MDPath	Formation	Dip/Dir
4420.1	4421.4	Bas Heebner	-0.50 0.60
5185.6	5185.4	Marathon	-0.50 0.60
5278.1	5306.8	Cherokee	-0.50 0.60
5389.8	5495.8	Misissippian	-0.50 0.60
5486.6	5726.4	Target Line 5485 @ 0 VS WLO.5' Up Dip	-0.50 0.62

ANNOTATIONS			
TVD	MD	+N-S	+E-W
4420.1	4421.4	0.0	0.0
4851.8	4853.0	-12.0	-77.2
4955.0	4956.0	-12.0	-77.2
5438.5	10032.0	4.50	4749.3
5438.5	10032.0	4.50	4749.3
5438.5	10032.0	4.50	4749.3



ALLIED OIL & GAS SERVICES, LLC 053838

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Medicine Lodge KS
07/26/2012

DATE <u>07/29/2012</u>	SEC. <u>18</u>	TWP. <u>34s</u>	RANGE <u>18w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Hoffman Family Trust</u>	WELL # <u>1-18H</u>	LOCATION <u>Battercreek KS, 2 South to Rd</u>			COUNTY <u>Comanche</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)		<u>V, 1/2 East, North Into</u>			<u>1.01</u>	<u>6.3</u>	

CONTRACTOR Patterson 421 OWNER Tug Hill Operatin

TYPE OF JOB <u>Surface</u>	CEMENT
HOLE SIZE <u>12 1/4</u>	AMOUNT ORDERED <u>2000x Class A + 3% cc +</u>
CASING SIZE <u>9 5/8</u>	<u>2% sms + 2% Gyseal + 1/2 # Floreal, 450 3x</u>
TUBING SIZE	<u>Class A + 2% cc</u>
DRILL PIPE	
TOOL	
PRES. MAX	COMMON <u>650 5x @ 16.25 10,562.50</u>
MEAS. LINE	POZMIX
CEMENT LEFT IN CSG. <u>42.65</u>	GEL
PERFS.	CHLORIDE
DISPLACEMENT <u>58 1/2 w/ Fresh H₂O</u>	ASC

EQUIPMENT		<u>Gyseal 4 3x @ 34.20 136.80</u>
PUMP TRUCK CEMENTER <u>Sam Thirnich 1</u>		<u>SMS 376 @ 3.00 1128.00</u>
#548/545 HELPER <u>Eddie Piper/Purnback 1</u>		<u>Floreal 30 @ 2.70 135.00</u>
BULK TRUCK		
#471/ - DRIVER <u>Scott Priddy R 2</u>		
BULK TRUCK		
#381/250 DRIVER <u>Troy Lenz 3</u>		
	HANDLING <u>686 @ 2.10 1440.60</u>	
	MILEAGE <u>31.66/35 @ 2.35 2604.03</u>	
	TOTAL <u>16,006.93</u>	

REMARKS:
Did not circ cement

Used lin to top off w/ 300 5x Class A + 2% cc

CHARGE TO: Tug Hill Operating
STREET _____
CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Jim Quisenberry
SIGNATURE Jim Quisenberry AFE: 12-D108
code: 830.18

SERVICE	
DEPTH OF JOB <u>799.27</u>	
PUMP TRUCK CHARGE <u>1625.00</u>	
EXTRA FOOTAGE <u>499 @ .95 474.05</u>	
MILEAGE <u>35 @ 7.00 245.00</u>	
MANIFOLD <u>Head Rental @ 200.00</u>	
<u>Light Vehicle 35 @ 4.00 140.00</u>	
<u>18 Hrs Waiting Time @ 100.00 N/C</u>	
TOTAL <u>2,184.05</u>	

PLUG & FLOAT EQUIPMENT	
<u>9 5/8</u>	
<u>1- Top Rubber plug @ 158.00</u>	
TOTAL <u>158.00</u>	

SALES TAX (If Any) 763.57
TOTAL CHARGES \$18,348.98
DISCOUNT 35% 6422.14 IF PAID IN 30 DAYS
Net \$ 11,926.84 (NR)

ALLIED CEMENTING CO., LLC. 32692

Federal Tax I.D.# 20-5976804

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

SERVICE POINT:

Medicine Lodge
8-13-11 8-18-11

DATE <u>8-12-12</u>	SEC <u>18</u>	TWP <u>34s</u>	RANGE <u>18W</u>	CALLED OUT <u>2:00 PM</u>	ON LOCATION <u>6:30 PM</u>	JOB START <u>9:30</u>	JOB FINISH <u>10:30</u>
LEASE <u>Hoffman</u> WELL # <u>1-18H</u> LOCATION <u>Buttermilk Ks., 1 S to Rd V, IE</u>				COUNTY <u>Comanche</u>	STATE <u>Ks</u>		
OLD OR <u>(NEW)</u> (Circle one)				<u>N/S</u>		<u>1-08</u>	

CONTRACTOR Patterson OWNER Tug Hill Operating

TYPE OF JOB Intermediate

HOLE SIZE 8 3/4" T.D. 6000'

CASING SIZE 7" DEPTH 5988.37

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 82.13

CEMENT LEFT IN CSO: 82.13

PERFS. _____

DISPLACEMENT 2 1/2

EQUIPMENT _____

CEMENT	AMOUNT ORDERED	<u>225 Chas A + 5% salt + 2% gel + 3% FI-160 + 5% Kalscal + DeFoamer</u>
COMMON	<u>825 @ 16.25</u>	<u>3656.25</u>
POZMIX	<u>@</u>	
GEL	<u>400 @ 21.25</u>	<u>85.00</u>
CHLORIDE	<u>@</u>	
ASC	<u>@</u>	
Salt	<u>600 @ 23.95</u>	<u>143.70</u>
FI-160	<u>63 @ 17.20</u>	<u>1083.60</u>
Sooal AsF	<u>@ 1.27</u>	<u>635.00</u>
DeFoamer	<u>31 @ 8.90</u>	<u>275.90</u>
HANDLING	<u>243.00 x 2.10 @</u>	<u>510.30</u>
MILEAGE	<u>388.50 x 2.35</u>	<u>912.88</u>
TOTAL		<u>7302.73</u>

PUMP TRUCK CEMENTER Ron Willey

548-545 HELPER Eddie Piper Bubra C. 1

BULK TRUCK # 364 DRIVER Brandon Boor

BULK TRUCK # _____ DRIVER _____

REMARKS:
See Cement Log

CHARGE TO: Tug Hill Operating

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>6000'</u>	
PUMP TRUCK CHARGE	<u># 2,695.00</u>	
EXTRA FOOTAGE	<u>@</u>	
MILEAGE	<u>35 @ 7.00</u>	<u>245.00</u>
MANIFOLD & Heal	<u>@</u>	<u>200.00</u>
light Veh.	<u>25 @ 4.00</u>	<u>100.00</u>
TOTAL		<u>\$ 3,280.00</u>

7" PLUG & FLOAT EQUIPMENT

1- Rubber Plug	<u>@ 182.00</u>	<u>182.00</u>
TOTAL		<u>\$ 182.00</u>

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME X Tony Earnest

SIGNATURE X Tony Earnest

SALES TAX (If Any) 375.79

TOTAL CHARGES \$ 10667.73

DISCOUNT 35 3733.71 IF PAID IN 30 DAYS

Net 6,934.02

ALLIED OIL & GAS SERVICES, LLC KB 053878

Federal Tax I.D.# 20-5975804

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

SERVICE POINT: Liberal, KS

DATE <u>08-20-12</u>	SEC <u>18</u>	TWP. <u>34s</u>	RANGE <u>18w</u>	mon. CALLED OUT	mon. ON LOCATION	tues JOB START	tues JOB FINISH
LEASE # <u>1100</u>	WELL # <u>1-1814</u>	LOCATION <u>Butternut, KS, 2s, 1/4 E, N/4</u>		COUNTY <u>Cornwall</u>	STATE <u>KS</u>		
OLD OR (NEW) (Circle one)				6.3			

CONTRACTOR Patterson UTI # OWNER Tughill

TYPE OF JOB Linear (Production)

HOLE SIZE 6 1/2 T.D. 10070

CASING SIZE 4 1/2 DEPTH (20070)

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4" DEPTH (5722)

TOOL _____ DEPTH _____

PRES. MAX 3100 MINIMUM _____

MEAS. LINE _____ SHOE JOINT 41.61'

CEMENT LEFT IN CSG. 42'

PERFS. _____

DISPLACEMENT 119 Bbls Fresh H₂O

CEMENT
AMOUNT ORDERED 450 sec class H + 3# Kalsol
+ 1% FL-160 + .25% SASI + .1% CR-20
& Deformers

COMMON class H	450 @	19.25	8662.50
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	@		
SASI	105 # @	15.91	1674.75
CR-20	42 # @	4.10	172.20
FL-160	425 # @	17.20	7310.00
Painted Deformers	63 # @	8.84	560.70
Kalsol	1350 # @	.89	1201.50
			1034.96
HANDLING	492.00 fr ³	@ 2.10	1033.20
MILEAGE	77.5 mi @ 35 mi	@ 2.31	1821.25

EQUIPMENT

PUMP TRUCK CEMENTER D. Felia 1

#530-484 HELPER L. Baeza 1 Liberal

BULK TRUCK

#562-534 DRIVER Vincente 3 Liberal

BULK TRUCK

DRIVER _____

REMARKS:

See Job Log.

Set Plug - Release hole

Reverted w/ Rig 39 Bbls Cement

THX ☺

CHARGE TO: Tughill

STREET _____

CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Jim Quisenberry

SIGNATURE Jim Quisenberry AFE: 12-0108
code: 830-18

SERVICE

DEPTH OF JOB	10070	
PUMP TRUCK CHARGE		4950.00
EXTRA FOOTAGE	@	
MILEAGE	35 @ 7	245.00
MANIFOLD	N/A @	
Light Vehicle	35 @ 4	140.00
Wait time 14 hrs - 4 x 10 @	400 @	4000.00
TOTAL		5335.00

PLUG & FLOAT EQUIPMENT

<u>None</u>	@	
	@	
	@	
	@	
	@	

TOTAL _____

SALES TAX (If Any) 1233.64

TOTAL CHARGES 3172.36 27772.36

DISCOUNT 9720.33 IF PAID IN 30 DAYS

Net 18052.03
+ wait. +4000.00
22052.03

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 11, 2012

Winnie Scott
Tug Hill Operating, LLC
550 BAILEY AVE, STE 510
FT. WORTH, TX 76107

Re: ACO1
API 15-033-21621-01-00
Hoffman Family Trust 1-18H
SE/4 Sec.18-34S-18W
Comanche 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,
Winnie Scott