



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1097659  
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: \_\_\_\_\_



1097659

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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
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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**#1 Selenke-Huelsman**

1045' FNL & 2450' FEL

55' S & 140' E of SW NW NE Section 22-13S-31W

Gove County, Kansas

API# 15-063-22011-0000

Elevation: 2936' GL, 2946' KB

Sample Tops			Ref. Well
Anhydrite	2435'	+511	-4
B/Anhydrite	2457'	+489	-3
Heebner	3970'	-1024	-9
Toronto	3994'	-1048	-9
Lansing	4012'	-1066	-9
Muncie	4168'	-1222	-15
LKC "I"	4214'	-1268	-12
Stark	4256'	-1310	-14
Hush.	4296'	-1350	-18
BKC	4334'	-1388	-20
Marmaton	4360'	-1414	-20
Altamont	4392'	-1446	-19
Pawnee	4455'	-1509	-17
Myrick	4486'	-1540	-15
Fort Scott	4513'	-1567	-22
Cherokee Sh.	4538'	-1592	-23
Johnson	4584'	-1638	-23
Morrow Sand	4416'	-1470	NA
Mississippian	4637'	-1691	-24
RTD	4740'	-1794	

**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 36968

LOCATION Oakley, KS

FOREMAN Kelly Gabel  
Miles Shaw

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
6-29-12	7575	#1 Selenke Huebeman	22	13 <sup>S</sup>	31 <sup>W</sup>	Gove	
CUSTOMER		MAILING ADDRESS		TRUCK #	DRIVER	TRUCK #	DRIVER
Ritchie Expl.		Oakley		399	Damon M		
CITY		STATE	ZIP CODE	460	Wes E		

JOB TYPE PTA HOLE SIZE 7 7/8 HOLE DEPTH 4740 CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: safety meeting, rigged up on Murfin drilling rig #14,  
mixed cement plugs, displaced down,  
25 sks @ 2445  
100 sks @ 1510  
40 sks @ 275  
10 @ 40  
30 R H  
@ 15 MH

L. Henke  
Kelly & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	1325 <sup>00</sup>	1325 <sup>00</sup>
5406	20	MILEAGE	5 <sup>00</sup>	100 <sup>00</sup>
1131	220 sks	60/40 Poz	15 <sup>10</sup>	3322 <sup>00</sup>
118B	757 #	Bentonite	2 <sup>25</sup>	189 <sup>25</sup>
1107	55 #	Flo-seal	2 <sup>83</sup>	155 <sup>10</sup>
5407	9.46	Ton Mileage delivery	1 <sup>67</sup>	410 <sup>00</sup>
4432	1	8 5/8 wooden Plug	96 <sup>00</sup>	96 <sup>00</sup>
			Subtotal	5597.35
			less 10% discount	559.74
			Subtotal	5037.61
			SALES TAX	272.58
			ESTIMATED TOTAL	5310.19

AVIN 3737

AUTHORIZATION Rolert W. Mickelson TITLE Tool Pusher DATE 6-29-12

250957

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.

# ALLIED OIL & GAS SERVICES, LLC 056287

Federal Tax I.D.# 20-5976804

MITTO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

Oakley

LE 6-20-12	SEC. 22	TWP. 13S	RANGE 31W	CALLED OUT	ON LOCATION	JOB START 12:00	JOB FINISH 12:30
WELL# 1	LOCATION Oakley 11s 5E 3S		COUNTY Grove		STATE KS		
D OR NEW (Circle one)		Y&E SINTO					

INTRACTOR Murfin 14

TYPE OF JOB Surface

PIPE SIZE 12 1/4 T.D. 2281

STRING SIZE 8 3/8 DEPTH 2281

PIPE SIZE DEPTH

PIPE DEPTH

ES. MAX MINIMUM

AS. LINE SHOE JOINT

MENT LEFT IN CSG. 15"

RFS.

PLACEMENT 13,560 BBL

EQUIPMENT

OWNER Same

CEMENT

AMOUNT ORDERED 175 SKS COM

300cc 200gcl

COMMON 175 SKS @ 16.25" 2843.25

POZMIX @

GBL 3 SKS @ 21.25 63.75

CHLORIDE 6 SKS @ 58.20 349.20

ASC @

@

@

@

@

@

@

@

IMP TRUCK CEMENTER Andrew Forsland

431 HELPER Dane Kretsch

JLK TRUCK

347 DRIVER Brandon Wilkerson

JLK TRUCK DRIVER

HANDLING 189.29 c/y/m @ 2.10 397.38

MILEAGE 2.35 mi/mile 8.636 ton 405.892

TOTAL 4059.97

REMARKS:

Cement did circulate

thank you

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE 1125.00

EXTRA FOOTAGE @

MILEAGE 20 miles @ 7.00 140.00

MANIFOLD head @ 200.00

Light vehicle @ 4.00 80.00

@

TOTAL 1545.00

CHARGE TO: Ritchie

REET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

I, 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.

SALES TAX (If Any)

TOTAL CHARGES 5,604.97

DISCOUNT IF PAID IN 30 DAYS

PRINTED NAME Craig Church

SIGNATURE Craig Church

*(Handwritten mark)*



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 16, 2012

John Niernberger  
Ritchie Exploration, Inc.  
8100 E 22ND ST N # 700  
BOX 783188  
WICHITA, KS 67278-3188

Re: ACO1  
API 15-063-22011-00-00  
Selenke-Huelsman 1  
NE/4 Sec.22-13S-31W  
Gove 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,  
John Niernberger