

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1102299

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

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: _____



1102299

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 (Attach Additional Sheets)	☐ Yes ☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes ☐ No	Name	Top	Datum
Cores Taken	☐ Yes ☐ No			
Electric Log Run	☐ Yes ☐ No			
List All E. Logs Run:				

CASING RECORD ☐ New ☐ 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
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ 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 (Amount and Kind of Material Used)	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: ☐ Vented ☐ Sold ☐ Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled (Submit ACO-5) ☐ Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Cholla Production, LLC
Well Name	Kyte-Ung 1-25
Doc ID	1102299

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
4	4008-11	200 gal 15% MCA Acid	4008-11
		300 gal 15% SGA acid/150 gal 2%KCL H2O	4008-11
4	3974-78	500 gal 15% MCA Acid	3974-78
		300 gal 15% SGA Acid/150 gal 2%KCL H2O	3974-78
4	3822-30	500 gal 15% MCA acid	3822-30
		2000 gal 20%SGA Acid/500gal KCL H2O	3822-30

ALLIED OIL & GAS SERVICES, LLC 056302

Federal Tax I.D.# 20-5976804

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

SERVICE POINT:

Oakley, KS

DATE <u>8-14-12</u>	SEC. <u>25</u>	TWP. <u>2</u>	RANGE <u>30</u>	CALLED OUT	ON LOCATION <u>5:00pm</u>	JOB START <u>6:00pm</u>	JOB FINISH <u>6:30pm</u>
LEASE <u>Ryfe-ung</u>	WELL# <u>1-25</u>	LOCATION <u>Oberlin, Ks SW, 1/4 N</u>	COUNTY <u>Decatur</u>	STATE <u>KS</u>			
OLD OR NEW (Circle one)				<u>W & N info</u>			

CONTRACTOR W & N #4

TYPE OF JOB Surface

HOLE SIZE 18 3/4" T.D. 2601

CASING SIZE 8 1/8" DEPTH 259.69

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX. MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 151

PERFS.

DISPLACEMENT 1566 bbl

OWNER same

CEMENT

AMOUNT ORDERED 1705 Ks as per 3200

270 gal

COMMON 1705 Ks @ 16.25 2762.50

POZMIX @

GEL 39 Ks @ 21.25 828.75

CHLORIDE 65 Ks @ 58.20 3782.20

ASC @

EQUIPMENT

PUMP TRUCK CEMENTER LaRane Wente

422 HELPER Wayne MacGhyby

BULK TRUCK

1347 DRIVER Brandon Wilkins

BULK TRUCK

DRIVER

HANDLING 183.84 543 @ 2.10 386.06

MILEAGE 8.37 mi x 65 x 2.85 1286.57

TOTAL 4843.08

REMARKS:

mix 1705 Ks cement

Produce with water

Cement did circulate

SERVICE

DEPTH OF JOB 2596.21

PUMP TRUCK CHARGE 1125.00

EXTRA FOOTAGE @

MILEAGE 65 @ 7.00 455.00

MANIFOLD swedge @ NC

L. Swedge 65 @ 4.00 260.00

CHARGE TO: Cholla production

STREET

CITY STATE ZIP

TOTAL 1840.00

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

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.

SALES TAX (If Any) 231.80

TOTAL CHARGES 6,683.08

DISCOUNT 30 1336.61 IF PAID IN 30 DAYS

PRINTED NAME MARK Hierskamp

SIGNATURE Mark Hierskamp

CUSTOMER

LEASE

JOB TYPE

DATE 20/04/19	PAGE NO.
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PAGE NO.

CUSTOMER

CAOLIA ~~XXXXXXXXXX~~

WELL NO.

LEASE

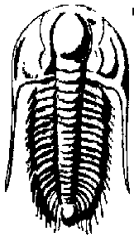
KYTE-UNG 1-25

JOB TYPE $\frac{1}{2}$ LONG STRING

TICKET NO.

232102

[illegible]



TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Cholla Production, LLC

7851 E Elati St. STE #201
Littleton, Co 80120

ATTN: Bill Goff

25-2S-30W - Decatur, KS

Kyte-Ung #1-25

Job Ticket: 45647

DST#: 1

Test Start: 2012.08.18 @ 07:43:00

GENERAL INFORMATION:

Formation: **Toronto - LKC"A"**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 09:52:45

Time Test Ended: 13:33:30

Test Type: Conventional Bottom Hole (Initial)

Tester: Kevin Mack

Unit No: 43

Interval: 3774.00 ft (KB) To 3835.00 ft (KB) (TVD)

Total Depth: 3835.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 2810.00 ft (KB)

2805.00 ft (CF)

KB to GR/CF: 5.00 ft

Serial #: 6799

Press@RunDepth: 42.84 psig @ ft (KB)

Start Date: 2012.08.18

End Date:

2012.08.18

Start Time: 07:43:05

End Time:

13:33:29

Capacity: 8000.00 psig

Last Calib.: 2012.08.18

Time On Btm: 2012.08.18 @ 09:52:00

Time Off Btm: 2012.08.18 @ 12:02:30

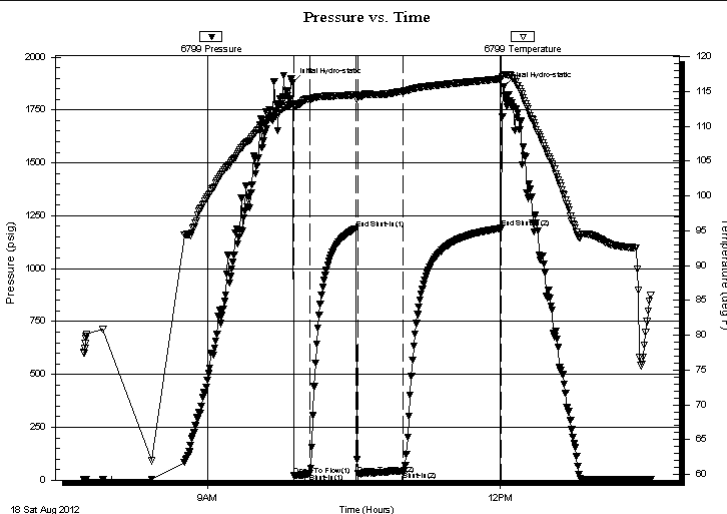
TEST COMMENT: 10 - IF- 1/8" Blow died in 4 in.

30 - IS- No Return

30 - FF- No Blow

60 - FS- No Return

PRESSURE SUMMARY



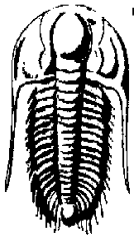
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1880.13	113.27	Initial Hydro-static
1	20.88	112.79	Open To Flow (1)
11	31.27	113.86	Shut-In(1)
39	1189.25	114.53	End Shut-In(1)
41	29.38	114.32	Open To Flow (2)
69	42.84	115.02	Shut-In(2)
129	1190.86	116.80	End Shut-In(2)
131	1859.60	117.43	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	Mud 100M	0.02

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

FLUID SUMMARY

Cholla Production, LLC

25-2S-30W - Decatur, KS

7851 E Elati St. STE #201
Littleton, Co 80120

Kyte-Ung #1-25

Job Ticket: 45647

DST#: 1

ATTN: Bill Goff

Test Start: 2012.08.18 @ 07:43:00

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:

ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbl

Water Loss: 7.60 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 1400.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	Mud 100M	0.025

Total Length: 5.00 ft Total Volume: 0.025 bbl

Num Fluid Samples: 0

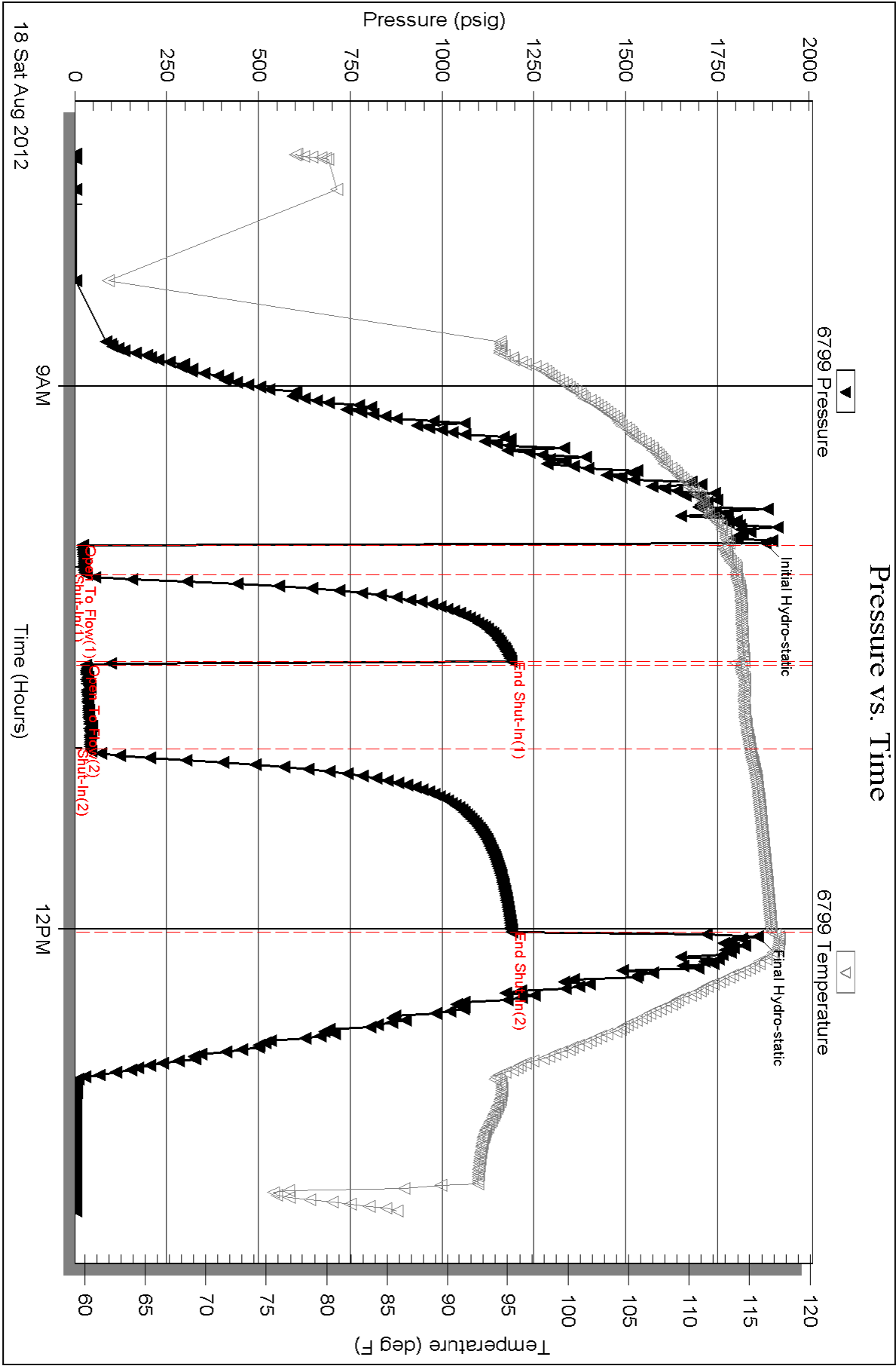
Num Gas Bombs: 0

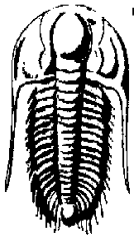
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Cholla Production, LLC

7851 E Elati St. STE #201
Littleton, Co 80120

ATTN: Bill Goff

25-2S-30W - Decatur, KS

Kyte-Ung #1-25

Job Ticket: 45648

DST#: 2

Test Start: 2012.08.19 @ 04:35:00

GENERAL INFORMATION:

Formation: **LKC "G"**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 07:01:45

Time Test Ended: 11:58:45

Test Type: Conventional Bottom Hole (Initial)

Tester: Kevin Mack

Unit No: 43

Interval: 3880.00 ft (KB) To 3945.00 ft (KB) (TVD)

Total Depth: 3945.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 2810.00 ft (KB)

2805.00 ft (CF)

KB to GR/CF: 5.00 ft

Serial #: 6799

Press@RunDepth: 102.08 psig @ ft (KB)

Start Date: 2012.08.19

End Date:

2012.08.19

Start Time: 04:35:05

End Time:

11:58:44

Capacity: 8000.00 psig

Last Calib.: 2012.08.19

Time On Btm: 2012.08.19 @ 07:00:45

Time Off Btm: 2012.08.19 @ 10:05:00

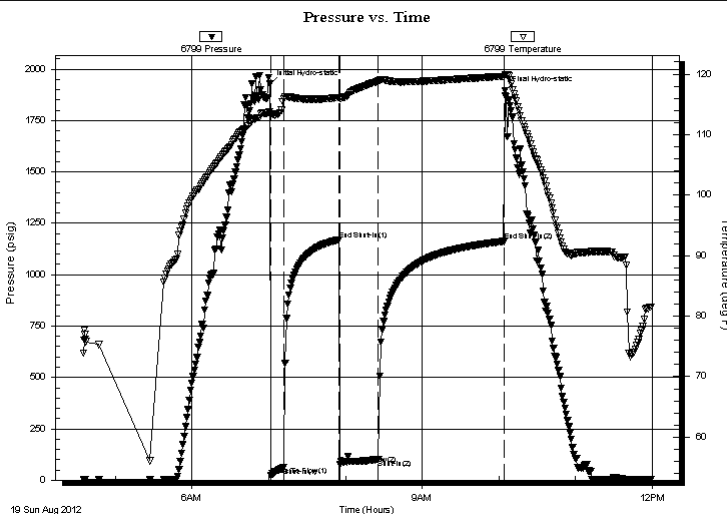
TEST COMMENT: 10 - IF- 1/2" Blow built to 3 1/2"

30 - IS- No Return

45 - FF- Surface Blow started at 1 min. Built to 6"

90 - FS- No Return

PRESSURE SUMMARY



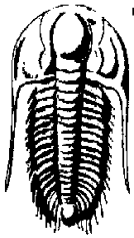
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1927.66	113.76	Initial Hydro-static
1	24.51	113.25	Open To Flow (1)
11	63.86	115.95	Shut-In(1)
54	1170.08	116.11	End Shut-In(1)
55	77.84	115.92	Open To Flow (2)
85	102.08	118.84	Shut-In(2)
183	1162.17	119.64	End Shut-In(2)
185	1894.98	119.93	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
60.00	WM 70M 30W	0.30
110.00	Mud 100M	1.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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TRILOBITE
TESTING, INC

DRILL STEM TEST REPORT

FLUID SUMMARY

Cholla Production, LLC

25-2S-30W - Decatur, KS

7851 E Elati St. STE #201
Littleton, Co 80120

Kyte-Ung #1-25

Job Ticket: 45648

DST#: 2

ATTN: Bill Goff

Test Start: 2012.08.19 @ 04:35:00

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:

20000 ppm

Viscosity: 54.00 sec/qt

Cushion Volume:

bbl

Water Loss: 7.60 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 1500.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
60.00	WM 70M 30W	0.295
110.00	Mud 100M	0.996

Total Length: 170.00 ft

Total Volume: 1.291 bbl

Num Fluid Samples: 0

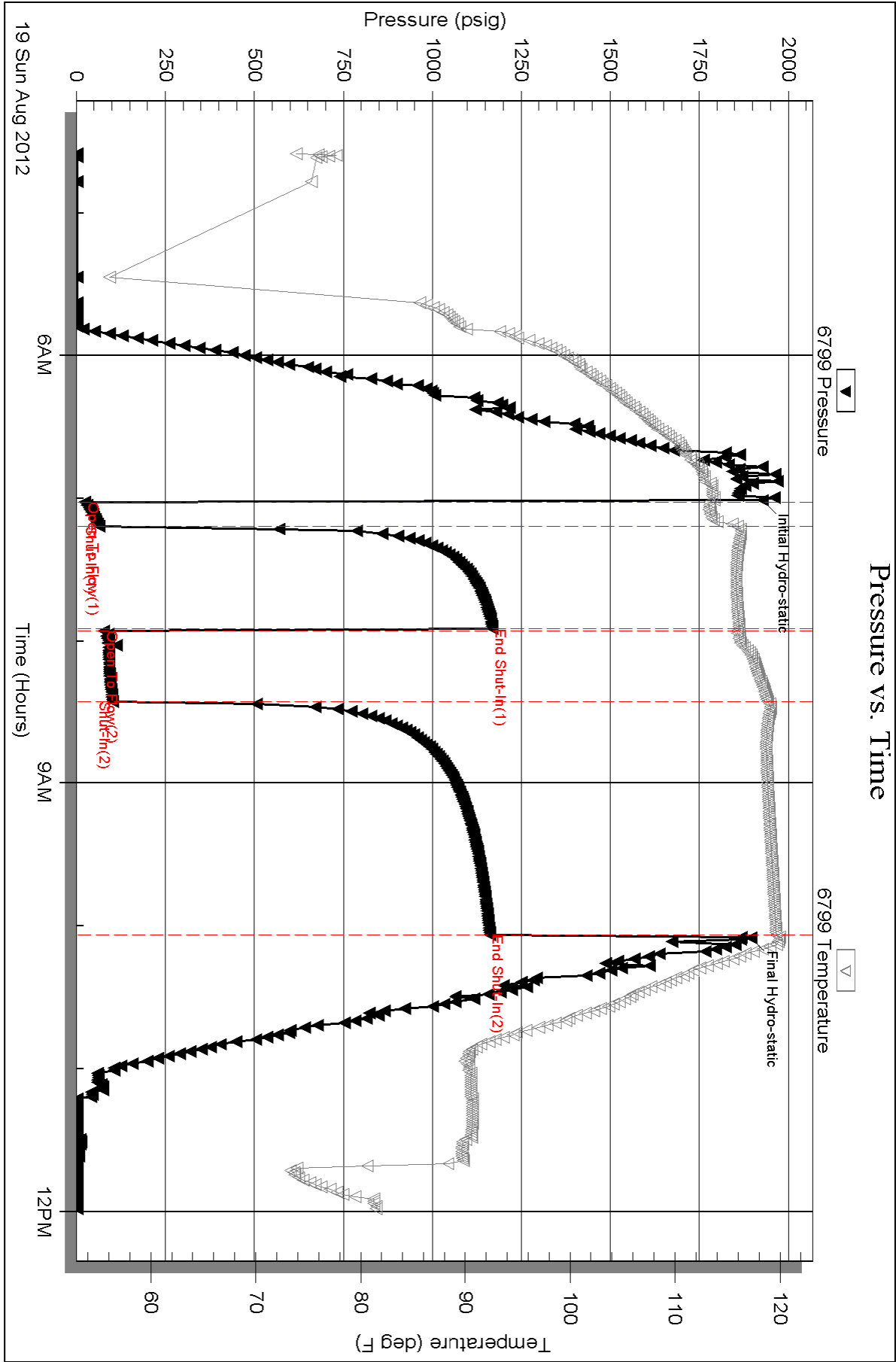
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: RW .29 @ 86 deg = 20,000ppm



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 27, 2012

Emily Hundley-Goff
Cholla Production, LLC
7851 S ELATI ST STE 201
LITTLETON, CO 80120-8081

Re: ACO1
API 15-039-21155-00-00
Kyte-Ung 1-25
NE/4 Sec.25-02S-30W
Decatur 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,
Emily Hundley-Goff