



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1103170
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: _____



1103170

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

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Bach, Jason dba Bach Oil Production
Well Name	Jessup Unit 2
Doc ID	1103170

Tops

Name	Top	Datum
Stone Corral	1655	+369
Base Stone Corral	1676	+348
Topeka	3004	-980
Heebner	3207	-1183
Toronto	3235	-1211
Lansing	3253	-1229
Muncie Creek	3363	-1339
Stark	3429	-1405
BKC	3473	-1449

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

BACH OIL PRODUCTION

WELL: JESSUP UNIT#2

LOC.: 200' FNL & 1605' FEL
SEC. 14-1-19W
PHILLIPS COUNTY, KANSAS
API: 15-147-20688-00-00

DRILLING CONTR.: MURFIN RIG #8
SPUD: 9-5-12 COMP: 9-9-12
MUD UP: 2800' TYPE MUD: CHEM.
DRILL TIME: 2900 to' RTD
RTD: 3510' LTD: 3510'
SAMPLES SAVED: 2950'-RTD
GEOLOGIST: ROBERT J. PETERSEN

ELEVATION

KB: 2024
 GL: 2019
 LOG MEASURED
 FROM: KB

SURFACE CASING

20# 8 5/8 "
 Casing set @ 232
 w/160 SX

PRODUCTION CASING

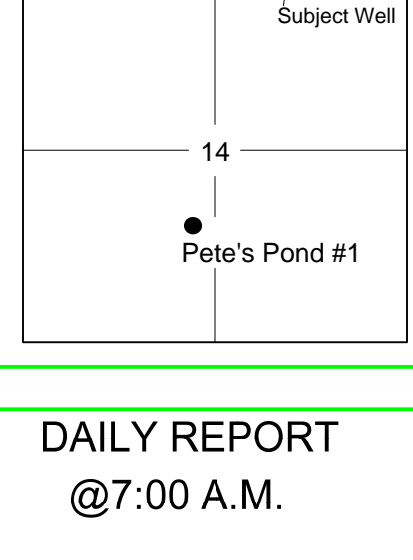
5 1/2" casing set

WELL LOG SURVEYS

DIL/CDL/MICRO

ELECTRIC LOG TOPS

FORMATION	DEPTH	DATUM	POS.	POS.
Stone Corral	1655	+369	-1	-2
Base Stone Corral	1676	+348	FLAT	+3
Topeka	3004	-980	-3	+5
Heebner	3207	-1183	-2	+11
Toronto	3235	-1211	-2	+9
Lansing	3253	-1229	-2	+8
Muncie Creek	3363	-1339	FLAT	+10
Stark	3429	-1405	-2	+9
BKC	3473	-1449	-5	+8
RTD	3510	-1486	N/A	N/A



REFERENCE WELL:

Bach
 Jessup Unit #1
 SE SW SE SE
 11-1-19W

Bach
 Pete's Pond #1
 NE SE NE SE
 14-1-19W

DAILY REPORT

@7:00 A.M.

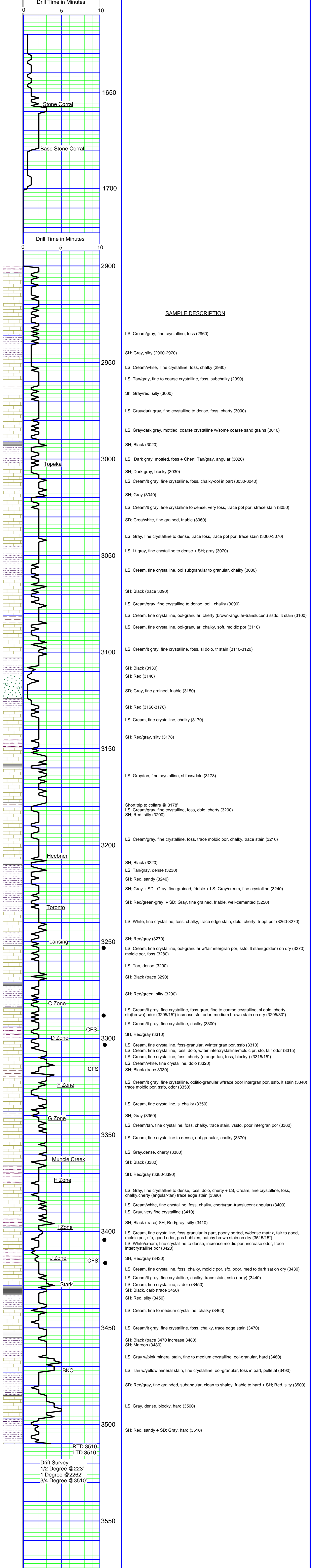
9-5-12 MIRU-SPUD
 9-6-12 670'
 9-7-12 2320'
 9-8-12 3178' Drilling
 9-9-12 3510' RTD Conditioning
 hole for prod casing

REMARKS AND RECOMMENDATIONS

Production casing was set to further test this well.

Respectfully submitted,

Robert J. Petersen
 Robert J. Petersen





INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 132691

Invoice Date: Sep 9, 2012

Voice: (817) 546-7282

Page: 1

Fax: (817) 246-3361



Bill To:
Bach Oil Production R. R. #1 Box 28 Phillipsburg, KS 67661

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Bach	Jessup #2	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-02	Russell	Sep 9, 2012	10/9/12

Quantity	Item	Description	Unit Price	Amount
90.00	MAT	Class A Common	17.90	1,611.00
60.00	MAT	Pozmix	9.35	561.00
3.00	MAT	Gel	23.40	70.20
3.00	MAT	Chloride	64.00	192.00
16.00	MAT	Salt	26.35	421.60
450.00	MAT	AMD	25.90	11,655.00
2,250.00	MAT	Gilsonite	0.98	2,205.00
735.26	SER	Cubic Feet	2.48	1,823.43
2,731.36	SER	Ton Mileage	2.60	7,101.54
1.00	SER	Long String	2,558.75	2,558.75
86.00	SER	Pump Truck Mileage	7.70	662.20
1.00	SER	Manifold Head Rental -- No Charge		
86.00	SER	Light Vehicle Mileage	4.40	378.40
1.00	EQP	5.5 Latch Down Plug	324.09	324.09
5.00	EQP	5.5 Gasket	394.29	1,971.45
10.00	EQP	5.5 Centralizer	57.33	573.30
1.00	EQP	5.5 Float Shoe	408.33	408.33
1.00	CEMENTER	Bobby Smith		
1.00	EQUIP OPER	Robert Yakubovich		
1.00	EQUIP OPER	Woody O'Neil		
1.00	OPER ASSIST	Walter Keith		

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ _____

ONLY IF PAID ON OR BEFORE

Oct 4, 2012

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
TOTAL	Continued



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 132691
Invoice Date: Sep 9, 2012
Page: 2



Bill To:

Bach Oil Production
R. R. #1 Box 28
Phillipsburg, KS 67661

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Bach	Jessup #2	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-02	Russell	Sep 9, 2012	10/9/12

Quantity	Item	Description	Unit Price	Amount
1.00	EQUIP OPER	Daniel Casper		

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 8049.60

ONLY IF PAID ON OR BEFORE
Oct 4, 2012

Subtotal	32,517.29
Sales Tax	1,359.52
Total Invoice Amount	33,876.81
Payment/Credit Applied	
TOTAL	33,876.81



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 132597
Invoice Date: Sep 5, 2012
Page: 1



Bill To:
Bach Oil Production R. R. #1 Box 28 Phillipsburg, KS 67661

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Bach	Jessup #2	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-01	Russell	Sep 5, 2012	10/5/12

Quantity	Item	Description	Unit Price	Amount
200.00	MAT	Class A Common	17.90	3,580.00
4.00	MAT	Gel	23.45	93.80
7.00	MAT	Chloride	64.00	448.00
216.59	SER	Cubic Feet	2.10	454.85
849.68	SER	Ton Mileage	2.35	1,996.75
1.00	SER	Surface	1,512.25	1,512.25
86.00	SER	Pump Truck Mileage	7.70	662.20
86.00	SER	Light Vehicle Mileage	4.40	378.40
1.00	CEMENTER	Todd Milarch		
1.00	EQUIP OPER	Tony Pfannenstiel		
1.00	OPER ASSIST	Kevin Rupp		

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 2251.10

ONLY IF PAID ON OR BEFORE
Sep 30, 2012

Subtotal	9,126.25
Sales Tax	280.28
Total Invoice Amount	9,406.53
Payment/Credit Applied	
TOTAL	9,406.53

ALLIED OIL & GAS SERVICES, LLC 056605

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell

DATE <u>9.5.12</u>	SEG <u>H</u>	TWP <u>1</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>5:30</u>	JOB FINISH <u>7:00</u>
LEASE <u>2550P</u>	WELL # <u>2</u>	LOCATION <u>Phillipsburg N to 13 1/2 3 1/2</u>			COUNTY <u>Phillips</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="checkbox"/> NEW (Circle one)		<u>5w to 13 1/2 1 1/2 E sink</u>			<u>2.01</u>	<u>6.8</u>	

CONTRACTOR Murkin B
TYPE OF JOB Surface
HOLE SIZE 12 1/4 T.D. 232
CASING SIZE 8 3/8 20 1/2 DEPTH 232
TUBING SIZE DEPTH
DRILL PIPE DEPTH
TOOL DEPTH
PRES. MAX MINIMUM
MEAS. LINE SHOE JOINT 15
CEMENT LEFT IN CSG. 15
PERFS.
DISPLACEMENT 13 3/4 bbl

OWNER
CEMENT
AMOUNT ORDERED 2000K Class A
3 1/2 LC 2 1/2 gal

COMMON	<u>200</u>	@	<u>17.90</u>	<u>3,580.00</u>
POZMIX		@		
GEL	<u>4</u>	@	<u>23.45</u>	<u>93.80</u>
CHLORIDE	<u>1</u>	@	<u>64.00</u>	<u>448.00</u>
ASC		@		
HANDLING	<u>210.60</u>	@	<u>2.10</u>	<u>454.86</u>
MILEAGE	<u>849.65</u>		<u>2.35</u>	<u>1996.75</u>
TOTAL				<u>6573.41</u>

EQUIPMENT

PUMP TRUCK CEMENTER John
409 HELPER Tony
BULK TRUCK
410 DRIVER Kevin
BULK TRUCK
DRIVER

REMARKS:

ran 5 hr 45 min, established circulation
mixed 2000K class A 3 1/2 LC 2 1/2 gal cement
Displaced 13 3/4 bbl H₂O. shut well in.
Cement 0.0 circulation to 26 1/2 hrs
Thanks!

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>1512.75</u>
EXTRA FOOTAGE	@			
MILEAGE <u>MLV</u> <u>86</u>	@	<u>7.71</u>		<u>662.22</u>
MANIFOLD	@			
<u>MLV</u> <u>86</u>	@	<u>4.4</u>		<u>378.9</u>
TOTAL				<u>2552.85</u>

CHARGE TO: Back Oil
STREET _____
CITY _____ STATE _____ ZIP _____

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)	<u>280.28</u>
TOTAL CHARGES	<u>2833.13</u>
DISCOUNT	<u>2243.08</u>
IF PAID IN 30 DAYS	

PRINTED NAME Rodney Farr
SIGNATURE Rodney Farr

Net 6575.15 BS 9-7
before tax

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

December 27, 2012

Jason Bach
Bach, Jason dba Bach Oil Production
PO BOX 723
ALMA, NE 68920-0723

Re: ACO1
API 15-147-20688-00-00
Jessup Unit 2
NE/4 Sec.14-01S-19W
Phillips 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,
Jason Bach