

Kansas Corporation Commission Oil & Gas Conservation Division

1105716

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	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: sx cmt
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	QuarterSec TwpS. R East West
ENHR Permit #:	County: Permit #:
GSW Permit #:	. 5
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	

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						
Letter of Confidentiality Received						
Date:						
Confidential Release Date:						
Wireline Log Received						
Geologist Report Received						
UIC Distribution						
ALT I II III Approved by: Date:						

Side Two



Operator Name:			Lease Name: _			_ Well #:	
Sec Twp	S. R	East West	County:				
time tool open and clo	osed, flowing and shu es if gas to surface te	d base of formations pen t-in pressures, whether s st, along with final chart(well site report.	hut-in pressure rea	ched static level,	hydrostatic press	sures, bottom h	nole temperature, fluid
Drill Stem Tests Taker (Attach Additional		Yes No		og Formatio	n (Top), Depth ar	nd Datum	Sample
Samples Sent to Geo	ological Survey	☐ Yes ☐ No	Nam	е		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Copy	d Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
		Report all strings set-		ermediate, producti	<u> </u>		
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 / SQL	 JEEZE RECORD			
Purpose: Depth Ty Perforate Top Bottom Ty Protect Casing		Type of Cement	# Sacks Used Type and Percent Additives				
Plug Back TD Plug Off Zone							
	DEDEODATI	ON RECORD - Bridge Plug	- O-4/T	Acid Fro	cture, Shot, Cemen	t Causana Dagar	
Shots Per Foot	Specify I		mount and Kind of Ma		Depth		
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	HR. Producing Meth		Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wat	er B	bls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:		METHOD OF COMPLE	ETION:		PRODUCTIO	ON INTERVAL:
Vented Solo		Open Hole	Perf. Dually	Comp. Cor	nmingled		
(If vented, Su	bmit ACO-18.)	Other (Specify)	(Submit)	4CO-5) (Sub	mit ACO-4)		_

HAT DRILLING 12371 KS HWY 7 MOUND CITY, KS 66056 LICENSE # 33734

Hicks #17 API # 15-091-23906-00-00 SPUD DATE 8-23-12

Footage 2 18 39 64 73 106 120 208 228 240 257 280 310 313 322 350 361 398 583 595 604 611 623 625 635 640 669 674	Formation Topsoil clay shale lime	Thickness 2 16 21 25 9 33 14 88 20 12 17 23 30 3 9 28 11 37 185 12 9 7 12 2 10 5 29 5	Set 42' of 7" TD 912' Ran 907' of 2 7/8
848	shale	174	1
857	sand	9	good odor, good bleed
912	shale	55	

RECEIVED
DEC 2 8 2012
KCC WICHITA

TEST	DUKET # E-Close 7
CASING MECHANICAL INTEGRITY TEST	AWSENE NW, Sec 28, T 14 S, R 22 EM
Disposal Enhanced Recovery:	a di Cartion Line
NW OF Flood	Feet from East Section Line 74413 Feet from East Section Line
Tertiary	Lease Hicks Well # I-17
Date injection started API #15 - 091 - 2390	County Johnson
Operator: Bradley Dil Company	Operator License # 31847 RECEIVED
Name &	Contact Person Bradd Schwart? DEC 28 2017
Address Po Box 21/44	Phone 405-340-7752 KCC WICHITA
Oklahoma City, DK 73156	
Max. Auth. Injection Press. ps	i; Max. Inj. Rate bbl/d; production Injection below production Tubing
Conductor Surface	2 1/2
Size	
Cement Top	
Botton	Set at
Packer type	oft. Perf. or open hole
Zone of injection	tive Tracer Survey Temperature Survey
Type Mit: Pressure	cive itacci but by
F Time: Start 10 Min. 20 Mi	n. 30 Min.
I E Pressures: 800	Set up 1 System Pres. during test
L	Set up 2 Annular Pres. during test
D	Set up 3 Fluid loss during testbbls.
D Casin	G - Tubing Annulus
Cacino X OI Casti	Pullan Plus
The bottom of the tested zone is	shut in with
0/12/010 115179	1)(12)(10)(10)
The postator reservice that the	t the zone between reet and
A. ID O	Selet President
was the zone tested Suntle S	ignature Title
	Marninal , NOT Satisfactury
The results were Satisfactory	Title Prut Witness: Yes No
State Agent Out Collins	
REMARKS:	ell not perforated
	Dist Office:
Orgin. Conservation Div.;	KDHE/T; Dist. Office;
Computer Update	50 KCC Form U-7 6/84



BARTLESVILLE, OK

918/338-0808

EL DORADO, KS

316/322-7022

EUREKA, KS

620/583-7664

PONCA CITY, OK

580/762-2303

OAKLEY, KS

785/672-2227

OTTAWA, KS

785/242-4044

THAYER, KS

620/839-5269

GILLETTE. WY

307/686-4914

REMIT TO

Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston. TX 77210-4346

MAIN OFFICE P.O. Box 884 Chanute, KS 66720 620/431-9210 • 1-800/467-8676 Fax 620/431-0012

Invoice # 252375 INVOICE Invoice Date: 08/27/2012 Terms: 0/0/30, n/30Page HICKS #17 BRADLEY OIL COMPANY 39544 P O BOX 21614 28-14-22 73156-1614 OKLAHOMA CITY OK 08-24-2012 (405) 751-9146 KS Qty Unit Price Total Description Part Number 121.00 10.9500 1324.95 50/50 POZ CEMENT MIX 1124 .2100 63.63 303.00 PREMIUM GEL / BENTONITE 1118B 28.00 28.0000 1.00 2 1/2" RUBBER PLUG 4402 Hours Unit Price Total Description 350.00 350.00 1.00 MIN. BULK DELIVERY 503 1.50 112.00 168.00 T-106 WATER TRANSPORT (CEMENT) 1.00 1030.00 1030.00 666 CEMENT PUMP 4.00 120.00 30.00 EQUIPMENT MILEAGE (ONE WAY) 666 .00 .00 906.00 CASING FOOTAGE 666 RECEIVED DEC 2 8 2012 KCC WICHITA 15091 23 906 0000 106.60 AR 1416.58 Freight: .00 Tax: Parts: 3191.18 .00 Total: .00 Misc: Labor: .00 .00 Change: .00 Supplies: Sublt: Date Signed



ticket number 39544

LOCATION Oftawa

FOREMAN Alan Maden

PO	Box	884,	Cha	nute,	KS	66720
						8676

FIELD TICKET & TREATMENT REPORT

BBS241 10 HCKS # DEVER TRUCKS DRIVER STATE DRIVER	520-431-9210 c	or 800-467-8676			CEMEN				
TRUCK P DRIVER D	DATE	CUSTOMER#	WELI		BER	SECTION	TOWNSHIP	RANGE	COUNTY
DUSTORE Bradley 0:1 Bradley 0:1 Bradley 0:1 Bradley 0:1 Brook 31614 516	8-24-12	1601	Hicks	#17		NU28		21	
MALLING ADDRESS OD BOX 21614 DISTORMAN STATE DISTORMAN	CUSTOMER	0.1						TPLICK #	
DISCOUNT QUANTY or UNITS DESCRIPTION OF SERVICES OF PRODUCT UNIT PRICE TOTAL T	brad!						71	15000	
STATE ZIPCODE DISTRIBUTION AND STATE SOUTH PIE TUBING OTHER SLURRY VOL. SALIES TAX. DISTRIBUTION OTHER TUBING OTHER CEMENT LEFT IS CASING SUZE & WEIGHT 2 1/8 OTHER SALIES TAX. DISTRIBUTION OTHER SALIES TAX. DESCRIPTION OF SERVICES OF PRODUCT UNIT PRICE TOTAL SALIES TAX. DISTRIBUTION OTHER SALIES TAX. DESCRIPTION OF SERVICES OF PRODUCT UNIT PRICE TOTAL SALIES TAX. DEC 2 8 2012 KCC WICHTA OTHER SALIES TAX. DISTRIBUTION TOTAL T	MAILING ADDRE	2.	1.177			10/0	11/	KI	Mae)
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HAT, ECL ACCOUNT CODE ACCOUN		111	CONTRACTOR OF CONTRACTOR				Jas Kic	X3	
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Plumped Plug to Cas's: TD. Well held 800 PST. Set Float. Closed valve. HAT ECL Admits a pumper of services of product and the services of pr	pumpe	d 100	Tr gel	Follow	Ned	by 10	1 SK 501	- 1	
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HYD2 28-00 RECEIVED DEC 28-2012 KCC WICHITA SALES TAX 1010-6-0	1100	20	3 H	1 70 1		* (E V.)			6313
RECEIVED DEC 2 8 2012 KCC WICHITA DESTANDA I OLO LO UNITA DE CONTROL DE CON		00	J —	194%	0/11	***		 	28.00
DEC 2 8 2012 KCC WICHITA SALES TAX i Olo Lo	4402	 +		20	pias			 	20.00
DEC 2 8 2012 KCC WICHITA SALES TAX i Olo Lo							RECEIVED		
SALES TAX IOLOGO									
SALES TAX IOLOGO				-			DEC 2 8-20	12	8
SALES TAX IOLOGO							_		刊 市 号
SALES TAX IOLAGO							KCC WICH	HA POR	ra T
SALES TAX IOLAGO							7:	Le. Harris	10 10 10 10 10 10 10 10 10 10 10 10 10 1
SALES TAX IOLAGO				 				<u> </u>	
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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

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