



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1103508
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
-----------------------------------	-----------------	---

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: _____



1103508

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
--	---

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: _____ _____
--	---	---

Form	ACO1 - Well Completion
Operator	Anderson Energy, Inc.
Well Name	MacDonald-Bondy 1
Doc ID	1103508

Tops

Name	Top	Datum
Anhydrite	1413	+724
Topeka	3155	-1018
Heebner	3428	-1291
Toronto	3450	-1312
Lansing	3468	-1331
BKC	3717	-1580
Pawnee	3793	-1656
Cherokee Sh	3847	-1710
Cherokee Sd	3856	-1719
Arbuckle	3903	-1766
RTD	3998	-1863

ALLIED OIL & GAS SERVICES, LLC 056561

Federal Tax I.D.# 20-5975804

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

Drilling

SERVICE POINT:
Russell KS

DATE <u>10-22-12</u>	SEC. <u>18</u>	TWP. <u>15</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION	JOB START <u>11:30am</u>	JOB FINISH <u>12:00Am</u>
LEASE <u>Bondy</u> WELL # <u>1</u>				LOCATION <u>Ellis KS 125 24 25 E into</u>		COUNTY <u>Ellis</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Southwind Drilling #2 OWNER _____

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 317

CASING SIZE 8 5/8 28# DEPTH 316.14

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 18 3/4 bbl

EQUIPMENT

PUMP TRUCK CEMENTER Robert #11

417 HELPER Woody #2

BULK TRUCK _____

378 DRIVER Walter #3

BULK TRUCK _____

_____ DRIVER _____

CEMENT

AMOUNT ORDERED 200 com 3%cc 2% gel

COMMON 200 @ 17.90 3580.00

POZMIX _____ @ _____

GEL 4 @ 23.40 93.60

CHLORIDE 7 @ 64.00 448.00

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 216.60 ft³ @ 2.48 537.16

MILEAGE 306.28 +/m 2.60 796.33

TOTAL 5455.09

REMARKS:

ran 7jt of 8 5/8 new 28# csg receive
circulation mix 200 com 3%cc 2% gel
displace 18 3/4 bbl of water shut in

Cement circulated to surface

Thank you!!

CHARGE TO: Anderson Energy

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 317

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE _____ @ _____

MILEAGE 31 HVM I @ 7.70 238.70

MANIFOLD _____ @ _____

31 LVMI @ 4.40 136.40

_____ @ _____

TOTAL 1887.35

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) 259.66

TOTAL CHARGES 7342.44

DISCOUNT 1945.75 IF PAID IN 30 DAYS

Net 5396.69 BS 10-24

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 William Sanders

SIGNATURE William Sanders



-17- 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th 13th 14th 15th 16th 17th 18th 19th 20th 21st 22nd 23rd 24th 25th 26th 27th 28th 29th 30th	SEC. 18	TWP. 15	RANGE 20	CALLED OUT	ON LOCATION	JOB START 4:30 pm	JOB FINISH 5:00 pm
WELL # 1	LOCATION Ellis KS 12.5 2W 2S E into			COUNTY Ellis	STATE KS		

FOR Express
 2B port caller
 T.D.
 ZE 5 1/2 DEPTH
 ZE 2 7/8 DEPTH 1333
 DEPTH
 DEPTH 1333
 MINIMUM
 SHOE JOINT
 EFT IN CSG.

OWNER
 used 205 stks
 CEMENT
 AMOUNT ORDERED 300 stk 6 3/4 4 3/4 gcl
 1/4 # 8 1/2

MENT 6 1/2 bbl.
 EQUIPMENT
 CK CEMENTER Robert Y Bob S.
 117 HELPER Woody O
 CK
 ?1 DRIVER Kerry T
 CK
 73 DRIVER Walter K - Nathan

COMMON	123	@	17.90	2201.70
POZMIX	82	@	9.35	766.70
GEL	7	@	23.40	163.80
CHLORIDE		@		
ASC		@		
Flt-seal 50#	2	@	2.97	148.50
		@		
		@		
		@		
		@		
		@		
HANDLING	321.67	@	2.48	797.73
MILEAGE	403.125	7/m	2.60	1048.13
TOTAL				5126.56

REMARKS:

run to 1333 pressure backside
 2nd held open port caller
 205 stks of 6 3/4 4 3/4 gcl 1/4 # 8 1/2
 6 1/2 bbl of water close port caller
 slide to 800' held can 5 jts
 clean with 18 bbl of water
 did circulate to surface

SERVICE

DEPTH OF JOB	1333		
PUMP TRUCK CHARGE	2600.00		
EXTRA FOOTAGE	@		
MILEAGE 30 HVMI	@	7.70	231.00
MANIFOLD	@		
30 LVMI	@	4.40	132.00
TOTAL 2963.00			

O: Anderson Energy
 STATE ZIP

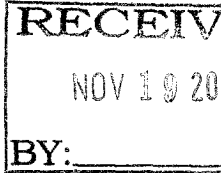
PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL 0			

Oil & Gas Services, LLC.
 hereby requested to rent cementing equipment
 a cementer and helper(s) to assist owner or
 to do work as is listed. The above work was
 in satisfaction and supervision of owner agent or
 I have read and understand the "GENERAL
 ND CONDITIONS" listed on the reverse side.

JAME Terry W. Piestras
 E Terry W. Piestras

SALES TAX (If Any) 206.68
 TOTAL CHARGES 8089.56
 DISCOUNT 1759.48 IF PAID IN 30 DAYS
 Net 6330.08 BS 11-9
 before tax



ALLIED CEMENTING CO., LLC. 034674

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
10-31-12	18	15	20			8 AM	9 AM
LEASEE	WELL #	LOCATION		COUNTY	STATE		
Mas donald	#1	Ellis Kansas		Ellis	Ks		
OLD OR (NEW) (Circle one)			12 South 2 West 2 South East into				

CONTRACTOR Southwind #2
 TYPE OF JOB Long String Production
 HOLE SIZE 7 1/2 T.D.
 CASING SIZE 5 1/2 DEPTH
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 175 sks of ASC
5# per sk of gilsonite

EQUIPMENT

PUMP TRUCK CEMENTER Tony A. Bob S.
 # 409 HELPER Kevin R. 13
 BULK TRUCK
 # 481 DRIVER Walter K. 3
 BULK TRUCK
 # DRIVER

COMMON ASC 175 sk @ 20.90 \$3,657.50
 POZMIX @
 GEL @
 CHLORIDE @
 ASC @

#875 - Gilsomite @ .98 \$857.50
 #50 - FL-160 @ 18.90 \$945.00
 #25 - DeFoamer @ 9.80 \$245.00
 12.661 - Super Flush @ 58.70 \$741.40

HANDLING 228.5 ft/3 @ 248 \$566.68
 MILEAGE 2.97 7/m 2.60 \$772.20

TOTAL 7748.28

REMARKS:

SERVICE

DEPTH OF JOB
 PUMP TRUCK CHARGE \$2,765.75
 EXTRA FOOTAGE @
 MILEAGE Heavy 30 miles @ 7.70 \$231.00
 MANIFOLD @
LBY 30 m. l @ 4.40 \$132.00

TOTAL 3128.75

CHARGE TO: Anderson Eng
 STREET
 CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

5 1/2 Top Rubber Plug \$85.45
 1 - Guide Shoe @ \$280.80
 1 - NEW Float @ \$334.62
 1 - Port Collar @ \$304.20
 2 - Cement Basket @ 394.29 \$788.58
 5 - Centralizers @ 57.33 \$458.44

TOTAL 4990.09

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.

SALES TAX (If Any) 718.16

TOTAL CHARGES 15867.12

DISCOUNT 5404.15 IF PAID IN 30 DAYS

PRINTED NAME William Sanders

SIGNATURE William Sanders

Net 10,392.97 BS 10-31
 before tax

Anderson Energy, Inc.
Drill Stem Test Report
Confidential

#1 MacDonald-Bondy
1370' FSL & 2300' FWL
Section 18-T15S-20W, Ellis County, Kansas

DST # 1 3483-3528 Lansing C & D. 45 (45) 60 (60) 1st open: Blow building to bottom in 13 min, 1st close: blowback to 3". 2nd open: blow building to bottom in 20 min. 2nd close: weak blowback. Recovered 283' Gas, 31' Clean Gassy Oil, 157' OCWM and 189' Muddy W w/ oil spots. IFP 32-109# FFP 113-193# ISIP 1210# FSIP 1201#.

DST #2 3579-3642'. Lansing H & I. 60 (60) 60 (60) Recovered 31' HOCM, (40% O 60% M), 63' SOCWM (5% O, 5% W, 90% M) & 63' MW. IFP 46-81# FFP 83-108# ISIP 1063# FSIP 974#.

DST #3 3805-43' Pawnee. 30 (30) 30 (30) Recovered 5' Mud w/oil spots. IFP 28-26# FFP 25-25# ISIP 183# FSIP 71#.

DST #4 3843-64' Cherokee Sand. 15 (30) 15 (30) Blow off bottom in 45 seconds, both opens. Blowback off bottom in 10 min, 1st shut-in, 9" blowback in 9 min 2nd shut-in. Rec 472' Gas In Pipe, 1433' Clean Gassy Oil & 94' MCGO (15% Mud, 20% Gas, 65% Oil) IFP 183-371# FFP 413-574# ISIP 1129# FSIP 1116#.

DST #5 3876-85' 2nd Cherokee Sand. Good blow built to bottom in 41 min 1st open, Fair blow built to 8" 2nd open. 60 (60) 60 (60) Recovered 20' CGO, 23' HOCGM (10% G, 40% O, 50% M), 58' SOCWM (5% G, 5% O, 20% W, 70% M) & 126' SOCWM (5% G, 5% O, 20% M, 70% W)

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

March 01, 2013

Bill Anderson
Anderson Energy, Inc.
300 W DOUGLAS AVE, STE 410
WICHITA, KS 67202

Re: ACO1
API 15-051-26394-00-00
MacDonald-Bondy 1
SE/4 Sec.18-15S-20W
Ellis 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,
Bill Anderson