Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1104000

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 #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
Oil WSW SWD SIOW	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Canad Data and Decaded TD Completing Data and	Quarter Sec TwpS. R East West
Spud Date orDate Reached TDCompletion Date orRecompletion DateRecompletion Date	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:				

	Page Two	
Operator Name:	Lease Name:	Well #:
Sec TwpS. 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 Yes No (Attach Additional Sheets)			L	og Formatio	Sample		
Samples Sent to Geolog	,	Yes No	Name	Э		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING Report all strings set-c			on, etc.		
Purpose of String Size Hole Size Casing Weight		Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
		ADDITIONAL	CEMENTING / SQU	EEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives			
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 galle				?Yes	No (If No, skip	question 3)	
Was the hydraulic fracturing	treatment information	n submitted to the chemical d	lisclosure registry?	Yes	No (If No, fill o	out Page Three o	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:	Siz	ze:	Set At:		Packer	r At:	Liner F		No	
Date of First, Resumed Production, SWD or ENHR. Producing Method: □ Flowing □ Pumping □ Gas Lift Other (Explain)										
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:		METHOD OF COMPLE		Comp. Commingled		PRODUCTION INTER	TVAL:			
(If vented, Su				Other (Specify)		(Submit A		(Submit ACO-4)		

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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 06, 2012

Chris Martin Tailwater, Inc. 6421 AVONDALE DR STE 212 OKLAHOMA CITY, OK 73116-6428

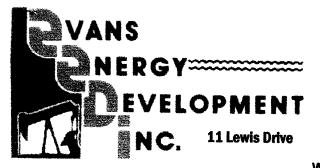
Re: ACO1 API 15-003-25590-00-00 Simons Bros. farms 3-IW NW/4 Sec.27-20S-20E Anderson County, Kansas

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, Chris Martin



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083 Fax: 913-557-9084

WELL LOG Tailwater, Inc. Simons Bros. Farms**\$**3-IW API#15-003-25,590 November 27 - November 29, 2012

Paola, KS 66071

Thickness of Strata	Formation	Total
13	soil & clay	13
3	clay & gravel	16
58	shale	74
31	lime	105
62	shale	167
10	lime	177
7	shale	184
36	lime	220
6	shale	226
24	lime	250
3	shale	253
22	lime	275 base of the Kansas City
170	shale	445
3	lime	448
17	shale	465
7	lime	472 oil show
13	shale	485
6	oil sand	491 green, good bleeding
1	coal	492
27	shale	519
1	coal	520
7	shale	527
6	lime	533
15	shale	548
8	lime	556
33	shale	589
7	lime	596
27	shale	623
6	broken sand	629 brown & green, good bleeding
34	shale	663
1	lime & shells	664
6	oil sand	670
4	shale	674 brown, good bleeding
3	sand	677 black, no oil
31	shale	708
30	silty shale	738
28	shale	766
4	sand	770 white, no oil
24	shale	794

Simons Bros Farms #3-IW

Page 2

13oil sand49shale

807 brown, good bleeding 856 TD

Drilled a 9 7/8" hole to 20.5' Drilled a 5 5/8" hole to 856'

Set 20.5' of 7" surface casing cemented with 6 sacks of cement.

Set 846.1' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.

CONSOLIDATED TICKET NUMBER 38964 Oil Well Services, LLC LOCATION O Hauva KS PO Box 884, Chanute, KS 66720 FIELD TICKET & TREATMENT REPORT 620-431-9210 or 800-467-8676 FIELD TICKET & TREATMENT REPORT DATE CUSTOMER# WELL NAME & NUMBER SECTION TOWNSHIP							
FOREMAN Fred Mader PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676 DATE L CUSTOMER # WELL NAME & NUMBER							
PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676 DATE L CUSTOMER # WELL NAME & NUMBER SECTION TOWNSULE							
DATE CUSTOMER# WELL NAME & NUMBER SECTION TOWNSING							
SECTION TOWNSHIP RANGE COUNTY							
11/30/12 7806 Simon Bros Farm 3 IW NW 29 20 20 AN							
CUSTOMER							
MAILING ADDRESS							
506 Fre Mad Safets Mad							
CITY STATE ZIP CODE 495 Har Bec HB d							
CITY STATE ZIP CODE 370 Ki Cor KC							
Oklahoma City OK 73116 558 Breman BM							
JOB TYPE LONG STUR HOLE SIZE 578 HOLE DEPTH 854 CASING SIZE & WEIGHT 278 EUR							
SLURRY WEIGHT SLURRY VOL WATER gal/sk CEMENT LEFT in CASING_ 2½ ¹¹ //LS							
DISPLACEMENT 4.92 BB DISPLACEMENT PSI MIX PSI RATE 5.8 PM							
REMARKS: Establish pump rate. Mix + Pump 100# Gel Flush. Mix + Pump							
110 sks 50/50 Por Mix Coment 2% bel. Coment to Surface. Flush							
pump + lines clean. Displace 2/2" rubber plug to casing TD.							
Pressure to 800 # PSI. Hold & Monitor pressure for 30 min. MIT.							
Release pressure to set float Value. Shut in casing.							

Evans Energy Dev. Inc - - Travis-

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRO	DUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495		103000
5406	25 Mi	MILEAGE	495		10000
5402	846	Casing Footoge			NIC
5407	1/2 Minimum	Ton Miles	558		1 09
5502C	Zhrs	go BBC Vac Truck	370		18000
1124	110 S#S	50/50 Por Mix Coment			120450
1118B	285#	Premium Gel 2/2" Rubbar Plug			5985
4402	- /	24" Rubber Pluc			2800
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			and the second se	فأسمه	
		·			
Ravin 3737			7.5%	SALES TAX	100 00
	1			ESTIMATED TOTAL	287815
AUTHORIZTION		TITLE		DATE	

Mali

255023

Jud

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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