

Confidentiality Requested:

Yes No

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

1110457

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:			Sec	TwpS. R	West
Address 2:			Feet	from North / South Line of	f Section
City: Sta	ate: Zip	D:+	Feet	from East / West Line o	f Section
Contact Person:			Footages Calculated from Ne	arest Outside Section Corner:	
Phone: ()			□ NE □ NW	□ SE □ SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				i. xx.xxxxx) (e.gxxx.xx	xxx)
Wellsite Geologist:			Datum: NAD27 N		
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 ☐ OG	☐ ENHR	☐ SIGW ☐ Temp. Abd.	Total Vertical Depth:	Plug Back Total Depth:	
CM (Coal Bed Methane)	G3W	Terrip. Abd.	Amount of Surface Pipe Set a	and Cemented at:	Feet
Cathodic Other (Core	Expl etc.)		Multiple Stage Cementing Co		
If Workover/Re-entry: Old Well Info					Feet
Operator:				nent circulated from:	
Well Name:			,	w/	sx cmt
Original Comp. Date:			loot doparto.		_ 0x 01111.
<u> </u>	_	NHR Conv. to SWD			
Deepening Re-perf. Plug Back	Conv. to GS		Drilling Fluid Management I (Data must be collected from the		
Commingled	Permit #:		Chloride content:	ppm Fluid volume:	bbls
Dual Completion	Permit #:		Dewatering method used:		
SWD	Permit #:		Location of fluid disposal if ha	uled offsite:	
☐ ENHR	Permit #:		On a water Manage		
GSW	Permit #:			L'anna II	
				License #:	
Spud Date or Date Rea	ched TD	Completion Date or		TwpS. R	
Recompletion Date		Recompletion 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 Approved by: Date:					

Page Two



Operator Name:				_ Lease l	Name: _			Well #:		
Sec Twp	S. R	East V	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(	shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	itic pressures, bot d.	tom hole temp	erature, flui	d recovery,
Final Radioactivity Lo- files must be submitte						gs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log
Drill Stem Tests Taker (Attach Additional S		Yes	No				on (Top), Depth ar			mple
Samples Sent to Geo	logical Survey	Yes	☐ No		Nam	e		Тор	Da	tum
Cores Taken Electric Log Run		☐ Yes ☐ Yes	☐ No ☐ No							
List All E. Logs Run:										
			CASING		☐ Ne					
	0: 11-1-	· ·				ermediate, product		// OI	T	d Damasat
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used		d Percent itives
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used		Type and F	ercent Additives		
Perforate Protect Casing										
Plug Back TD Plug Off Zone										
Did you perform a hydrau	•					Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to							= :	p question 3)	of the ACO	()
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemicai d	isciosure re	gistry?	Yes	No (If No, fill	out Page Three	or the ACO-1	<i>)</i> 
Shots Per Foot		ION RECORD - I Footage of Each I					cture, Shot, Cement mount and Kind of Ma		d	Depth
TUBING RECORD:	Size:	Set At:		Packer A	i:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or Ef	NHR. Prod	ducing Meth	ıod:		1				
			Flowing	Pumpin	g	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls. (	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		M	METHOD OF	COMPLE	ETION:		PRODUCTION	ON INTERVA	
Vented Sold		Open		Perf.	Dually	Comp. Cor	mmingled			
	bmit ACO-18.)		(Specify)		(Submit )	ACO-5) (Sub	mit ACO-4)			

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/

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

January 27, 2013

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

Re: ACO1

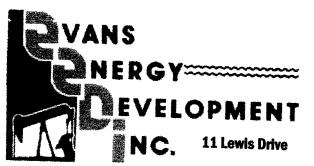
API 15-003-25709-00-00 Pedrow 14-IW NE/4 Sec.28-20S-20E Anderson County, Kansas

#### **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, Christian L. Martin



## Oil & Gas Well Drilling Water Wells Geo-Loop Installation

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

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Paola, KS 66071

#### **WELL LOG**

Tailwater, Inc. Pedrow #14-IW API#15-003-25,709

January 14 - January 16, 2013

<b>**</b>		andary 10, 2013
Thickness of Strata	<b>Formation</b>	<u>Total</u>
8	soil & clay	8
3	clay & gravel	11
67	shale	78
31	lime	109
68	shale	177
10	lime	187
7	shale	194
37	lime	231
5	shale	236
22	lime	258
3	shale	261
23	lime	284 base of the Kansas City
170	shale	454
3	lime	457
5	shale	462
2	lime	464
5	shale	469
7	lime	476 oil show
10	shale	486
10 1	oil sand	496 green, ok bleeding
13	coal	497
4	shale	510
13	sand	514 grey, no oil
13	oil sand	527 green,ok bleeding
7	coal	528
6	shale	535
15	lime	541
8	shale 	556
33	lime	564
7	shale 	597
29.5	lime	604
6	shale	633.5
33.5	broken sand	639.5 brown & green, light bleeding
1	shale	673
5	lime & shells	674
1	oil sand	679 brown, good bleeding
4	broken sand	680 brown & grey, ok bleeding
<b>-</b>	shale	684

Pedrow #14-IW Page 2

3 sand 687 black, no oil 545 shale 732 TD

Drilled a 9 7/8" hole to 23.9' Drilled a 5 5/8" hole to 732'

Set 23.9' of 7" surface casing cemented with 6 sacks of cement.

Set 722.4' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.

### **Core Times**

635	<u>Minutes</u>	Seconds			
636		43	662	30	
	1	1	663	38	
637		47	664	38	
638		45	665	50	
639		52	666	40	
640	1	16	667	50	
641		57	668	47	
642		52	669	47	
643		56	670	50	
644	1	0	671	47	
645		57	672	48	
646		52	673	54	
647		52	674	47	
648		51	675	52	
649		50	676	48	
650		47	677	45	
651		48	678	45	
652		48	679	42	
653 654		51	680	30	
655		52	681	33	
656		38	682	38	
657	1	51	683	40	
658	1	7	684	38	
659	1	23 3	685	1 2	
660	•	30	686	49	
661		44			
				•	



**TICKET NUMBER** LOCATION \_\_\_\_\_\_\_ FOREMAN A

FIELD TICKET & TREATMENT REPORT

320-431-9210 c	r 800-467-8676	20 5		CEMEN	NT.			
DATE	CUSTOMER#		NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
1-16-13	7808	Pedron	114	IW	NE 28	20	20	AN
CUSTOMER,					TRUCK#	DRIVER	TOUGK #	DD0//50
<u>んぱいん</u> MAILING ADDRE	vater		!	-	516	AlaMad	TRUCK#	DRIVER
[ ( ( ) (		ondales			368	Bal Mal)	ARM	Jines
CITY (	1,00	STATE 2	ZIP CODE	.]	369	Der Mas	DM	
DKlahoma	6 4W	OK	73116	1	(548	Mik Hag	NH	
JOB TYPE OF		HOLE SIZE	35/8	_ _HOLE DEPT	rh 732	CASING SIZE & V	VEIGHT 2	R
CASING DEPTH	ショック ノ	DRILL PIPE		_ _TUBING		<u> </u>	OTHER	
SLURRY WEIGH		SLURRY VOL		WATER gal	/sk	CEMENT LEFT in	CASING 1/2.	20
DISPLACEMENT	11 7	DISPLACEMENT	PSI		200 <u> </u>	RATE 460	. /	
	Id nee	ting Ess	tablis	yel re	ite. Mi	xed + Pun	npel 10	0#
aril fo	Howel .	by 101	SK.	50/50	ceme	not plus	270,98	1/2
( Nous	atel c	enent	Flygh	red y	sump. 1	umped	p/49	10
Casino	$T_{0}$	Well	jeld 8	300 K	SI for	30 ninu	re mi	14.
Sr. 7	Cloat,	Closed	val	ve		•		
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	<i>'</i>	<del></del>				TV		<del>1</del>
ACCOUNT CODE	QUANITY	or UNITS	DI	ESCRIPTION	of SERVICES or P		UNIT PRICE	TOTAL
3401			PUMP CHAR	GE		368		1030, ac
3406			MILEAGE			368		
5402		22	Casi.	11 70	otose_	368	<u> </u>	
5407	1/2	nin	ton	miles		348		175.00
30 33020	$\frac{1}{2}$		80 V	ic		369		180,00
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						<u>.</u>		
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111813	2	70#	901			· · · · · · · · · · · · · · · · · · ·		56,20
NUDT	,		2/2	Olus				28.00
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						· 17/1		2 (M
						المسا		:
· · · · · · · · · · · · · · · · · · ·	-							
							SALES TAX	92.86
Ravin 3737		1					ESTIMATED TOTAL	2668.5
	. Hat	A		TITLE			DATE	1000000
AUTHORIZTION	1 <u> 170</u>			TITLE			DATE	- i

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.