



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1112556
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: _____



1112556

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
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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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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ALLIED OIL & GAS SERVICES, LLC 053945

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Medicine Lodge KS

DATE <u>11/16/12</u>	SEC. <u>10</u>	TWP. <u>34s</u>	RANGE <u>11w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Medicine River Ranch</u>	WELL # <u>D#8</u>	LOCATION <u>Carlane + Bethal; South to Scott Canyon, West cross CG, North of Hwy 54</u>			COUNTY <u>Barber</u>	STATE <u>KS</u>	<u>7:30 PM</u>
OLD OR (NEW) (Circle one)					<u>1.01</u>		<u>1.3</u>

CONTRACTOR Hardt OWNER N-10 Exploration

TYPE OF JOB Surface
 HOLE SIZE 12 1/4 TD. 268
 CASING SIZE 8 5/8 DEPTH 265.05
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH

CEMENT AMOUNT ORDERED 225sx 60:40:3% cct 2% Gel

TOOL DEPTH
 PRES. MAX 400 MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 20ft
 PERFS.
 DISPLACEMENT 15 3/4 BBL

COMMON <u>Class A</u>	<u>135sx @ 17.90</u>	<u>2416.50</u>
POZMIX	<u>90sx @ 9.35</u>	<u>841.50</u>
OEL	<u>4sx @ 23.40</u>	<u>93.60</u>
CHLORIDE	<u>8sx @ 64</u>	<u>512</u>
ASC	@	

EQUIPMENT

PUMP TRUCK CEMENTER Jason Thimesch 1
 # 360/302 HELPER Ron Gilley 1
 BULK TRUCK
 # 421/252 DRIVER Justin Brewer 2
 BULK TRUCK
 # DRIVER

HANDLING 241.73 @ 2.48 599.49
 MILBAGB 10.15 ton x 20mi x 2.60 527.80
 TOTAL 4990.89

REMARKS:

Did circ cement

SERVICE

DEPTH OF JOB 265
 PUMP TRUCK CHARGE 1512.25
 EXTRA FOOTAGE @
 MILEAGE 20mi @ 7.70 154
 MANIFOLD 20mi @ 4.40 88

CHARGE TO: N-10 Exploration
 STREET
 CITY STATE ZIP

TOTAL 1754.25

PLUG & FLOAT EQUIPMENT

@
 @
 @
 @
 @

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.

TOTAL _____

SALES TAX (if Any) 282.04
 TOTAL CHARGES 6745.14
 DISCOUNT 1349.03 IF PAID IN 30 DAYS
Net 5396.11

PRINTED NAME Scott Adelhardt
 SIGNATURE Scott C Adelhardt

ALLIED OIL & GAS SERVICES, LLC 053948

Federal Tax I.D.# 20-5976804

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

SERVICE POINT:
Medicine Lodge KS

DATE <u>11/26/12</u>	SEC. <u>10</u>	TWP. <u>34s</u>	RANGE <u>11w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Medicine River Reach</u>	WELL # <u>D-8</u>	LOCATION <u>Garkanc + Bethel, South to Scott Co, Barber</u>			COUNTY	STATE	
OLD OR <u>NEW</u> (Circle one)	West access CG, North part Hay Shed			1.0 ⁰⁰		1.3	

CONTRACTOR Hardt
 TYPE OF JOB Production
 HOLE SIZE 7 7/8 T.D. 5078
 CASING SIZE 5 1/2 DEPTH 5072
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 1400 MINIMUM
 MEAS. LINE SHOBJOINT 32.97
 CEMENT LEFT IN CSG. 33
 PERFS.
 DISPLACEMENT 123 BBLs 2% KCL H₂O

OWNER N-10 Exploration
 CEMENT
 AMOUNT ORDERED 200sx Class H + 10% salt + 50 Kalscal, 40sx 60:40:4% Gel + 4% SMS, 800gal ASF, 15 Gal KCL

EQUIPMENT
 PUMP TRUCK CEMENTER Jason Thinesch 1
#558/555 HELPER Scott Pridky 2
 BULK TRUCK
#361/250 DRIVER Jake Head 3
 BULK TRUCK
 # DRIVER

COMMON Class A	24sx @ 17.90	429.60
POZMIX	16sx @ 9.35	149.60
GBL	2 sx @ 23.40	46.80
CHLORIDE	@	
ASC	@	
Sonyon Class H	200sx @ 21.20	4240
Salt	20 sx @ 26.35	527
Kalscal	1660 lbs @ 0.98	980
Sodian Metasilicate	14 lbs @ 3.30	46.20
	@	
KCL	15 Gal @ 34.40	516
Superflush	12 BBLs @ 58.70	704.40
	@	
HANDLING	276.28 cu ft @ 2.48	685.17
MILBAGE	12.13 hrs x 20mi x 2.60	630.76
TOTAL		8955.53

REMARKS:
Plug did not hold closed in small leak on Head

217.60⁰⁰

SERVICE

DEPTH OF JOB	5072	
PUMP TRUCK CHARGE		3099.25
EXTRA FOOTAGE	@	
MILEAGE	20mi @ 7.70	154
MANIFOLD + Head	@	275
LV	20mi @ 4.40	88
	@	
TOTAL		3616.25

CHARGE TO: N-10 Exploration
 STREET _____
 CITY _____ STATE _____ ZIP _____

5 1/2

PLUG & FLOAT EQUIPMENT

recip scratchers	10 @ 88.92	889.20
centralizers	8 @ 57.33	458.64
Guide Shoe	1 @ 280.80	280.80
AFU insert	1 @ 234.62	234.62
	@	
TOTAL		1963.26

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) 701 -
 TOTAL CHARGES 14525.04
 DISCOUNT 2907.01 IF PAID IN 30 DAYS
Net 111628.03

PRINTED NAME TIM PIERCE
 SIGNATURE Tim Pierce

Timothy G. Pierce

Petroleum Geologist

GEOLOGIST'S REPORT DRILLING TIME AND SAMPLE LOG

COMPANY N-10 Exploration, LLC
 LEASE Medicine River Ranch 'D' #8
 FIELD Landis
 LOCATION 2970' FSL & 400' FEL
 SEC 10 TWP 34S RGE 11W
 COUNTY Barber STATE Kansas
 CONTRACTOR Hardt Drilling Rig #1
 SPUD 11-15-2012 COMP 11-26-2012
 RTD 5078 LTD 5076
 MUD UP 3127 TYPE MUD Chemical
 SAMPLES SAVED FROM 4500 TO RTD
 DRILLING TIME KEPT FROM 4000 TO RTD
 SAMPLES EXAMINED FROM 4000 TO RTD
 GEOLOGICAL SUPERVISION FROM 4150' to RTD
 GEOLOGIST ON WELL Tim Pierce

ELEVATIONS

KB 1382'
 DF _____
 GL 1372'

Measurements Are All
 From Kelly Bushing

CASING

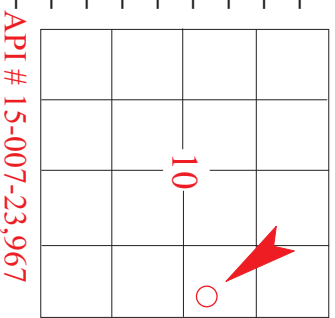
CONDUCTOR _____
 SURFACE 8-5/8" at 267'
 PRODUCTION 5-1/2" at 5070'

ELECTRICAL SURVEYS

DIL / CN-CD
Pioneer Energy Svcs.

FORMATION TOPS


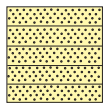
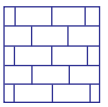
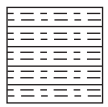

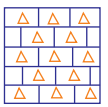
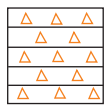
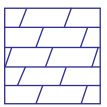
FORMATION TOPS	ELECTRIC LOG	SAMPLE
Heebner Sh.	3636 (-2254)	NA
Stark Sh.	4316 (-2934)	4318 (-2936)
Cherokee Sh.	4534 (-3152)	4537 (-3155)
Mississippi	4579 (-3197)	4587 (-3205)
Kinderhook Sh.	4768 (-3386)	4770 (-3388)
Chattanooga Sh.	4852 (-3470)	4854 (-3472)
Viola	4904 (-3522)	4908 (-3526)
Simpson	4995 (-3613)	4999 (-3617)



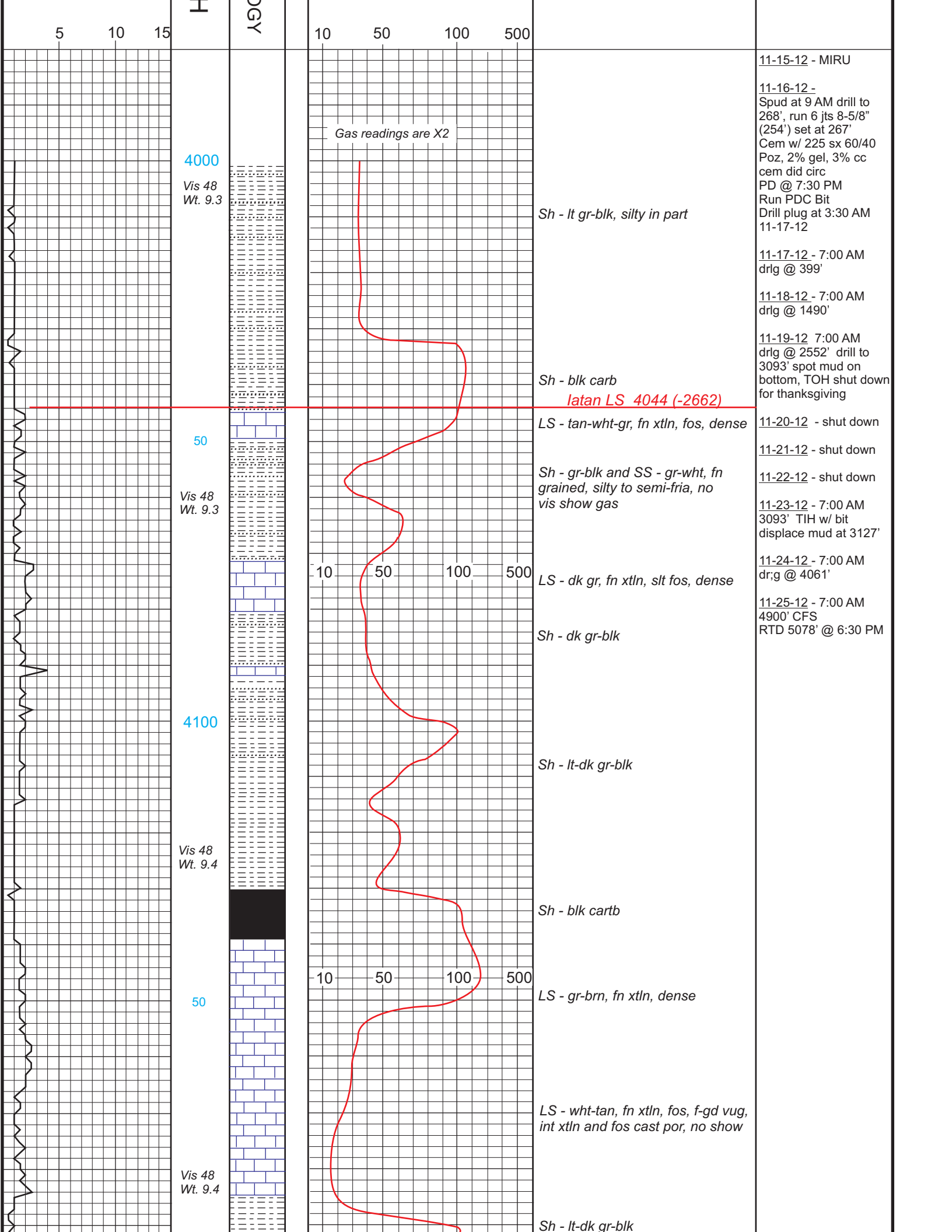
REMARKS Samples and electric logs indicated a productive zone in the Meisner Sd. from 4882'- 4887'
Samples and electric logs indicate a productive zone in the Mississippi from 4580'- 4671'.
A sample show was observed in the Chattanooga Sh. from 4852'- 4861'
Samples indicated a slight show of oil in the Cherokee Sd. from 4566'- 4570'
Electric logs indicate a possible gas zone in the Stalnaker Sd. from 4070'- 4074'
There were no other zones of interest indicated by samples or electric logs

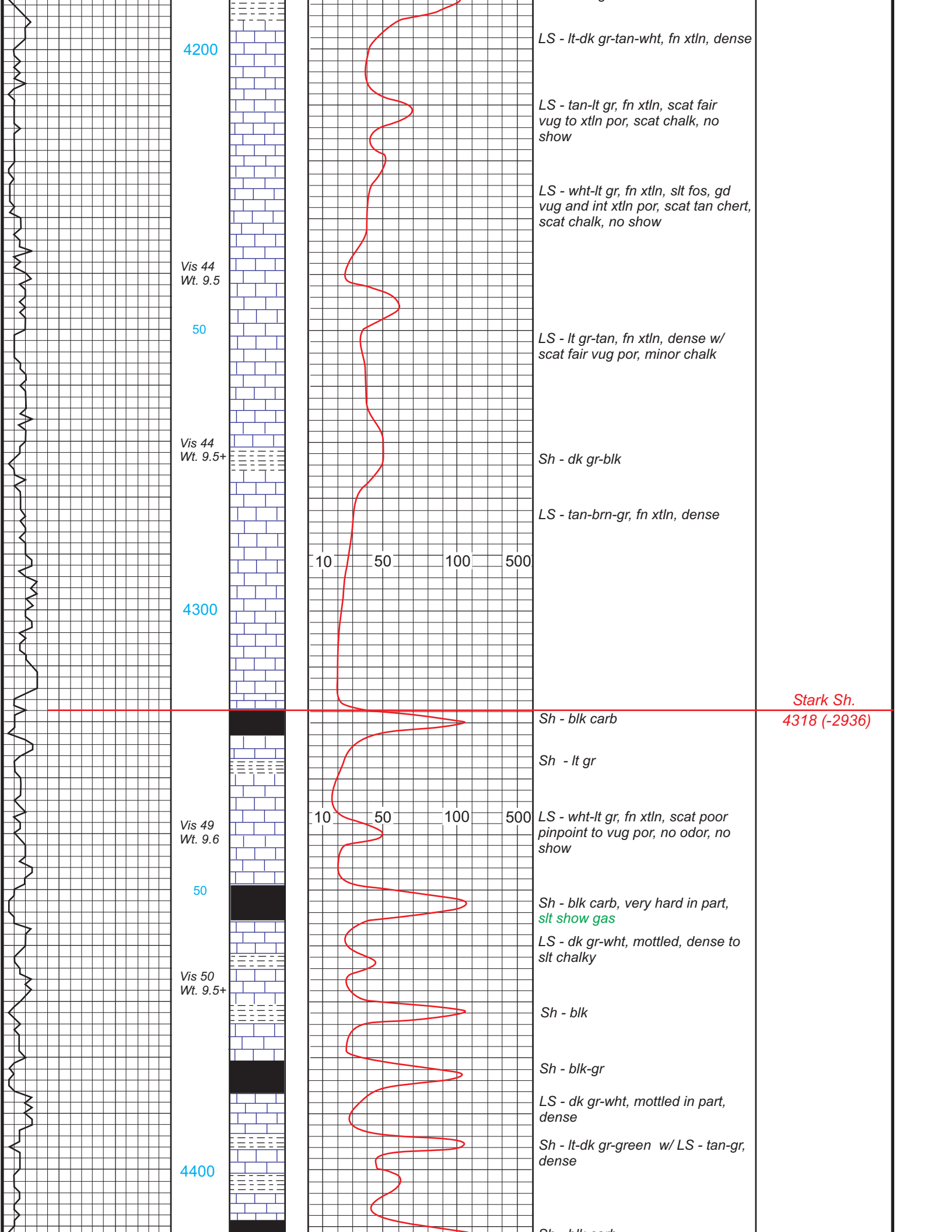
Timothy G. Pierce

LEGEND

							
Anhydrite	Sandstone	Limestone	Shale	Carb Sh	Cherty LS	Chert	Dolomite

DRILLING TIME IN MINUTES PER FOOT Rate of Penetration Decreases →	DEPTH	LITHOLOG	GAS SCALE	SAMPLE DESCRIPTION	REMARKS





4200

LS - lt-dk gr-tan-wht, fn xtln, dense

LS - tan-lt gr, fn xtln, scat fair
vug to xtln por, scat chalk, no
show

LS - wht-lt gr, fn xtln, slt fos, gd
vug and int xtln por, scat tan chert,
scat chalk, no show

Vis 44
Wt. 9.5

50

LS - lt gr-tan, fn xtln, dense w/
scat fair vug por, minor chalk

Vis 44
Wt. 9.5+

Sh - dk gr-blk

LS - tan-brn-gr, fn xtln, dense

10 50 100 500

4300

Stark Sh.
4318 (-2936)

Sh - blk carb

Sh - lt gr

Vis 49
Wt. 9.6

10 50 100 500

LS - wht-lt gr, fn xtln, scat poor
pinpoint to vug por, no odor, no
show

50

Sh - blk carb, very hard in part,
slt show gas

LS - dk gr-wht, mottled, dense to
slt chalky

Vis 50
Wt. 9.5+

Sh - blk

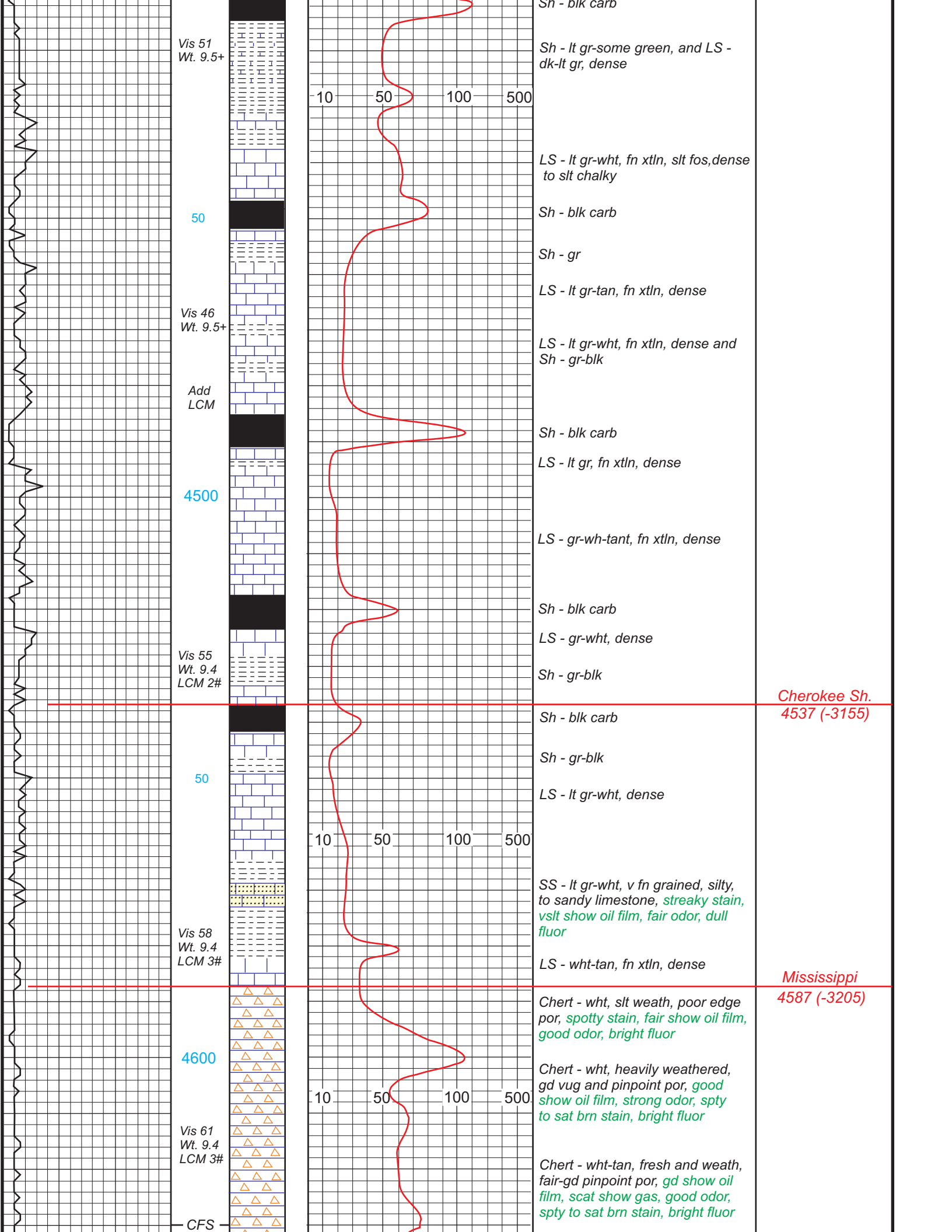
Sh - blk-gr

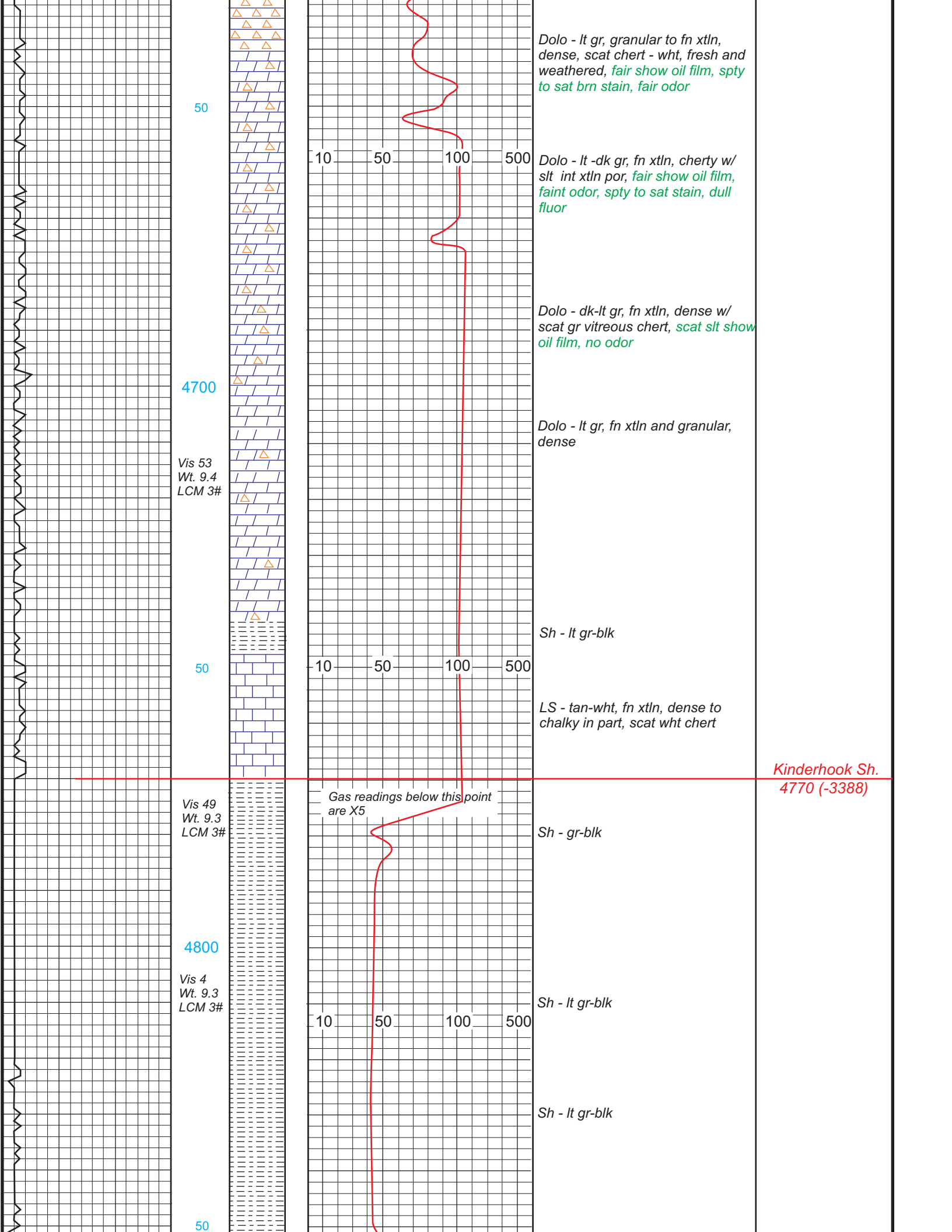
LS - dk gr-wht, mottled in part,
dense

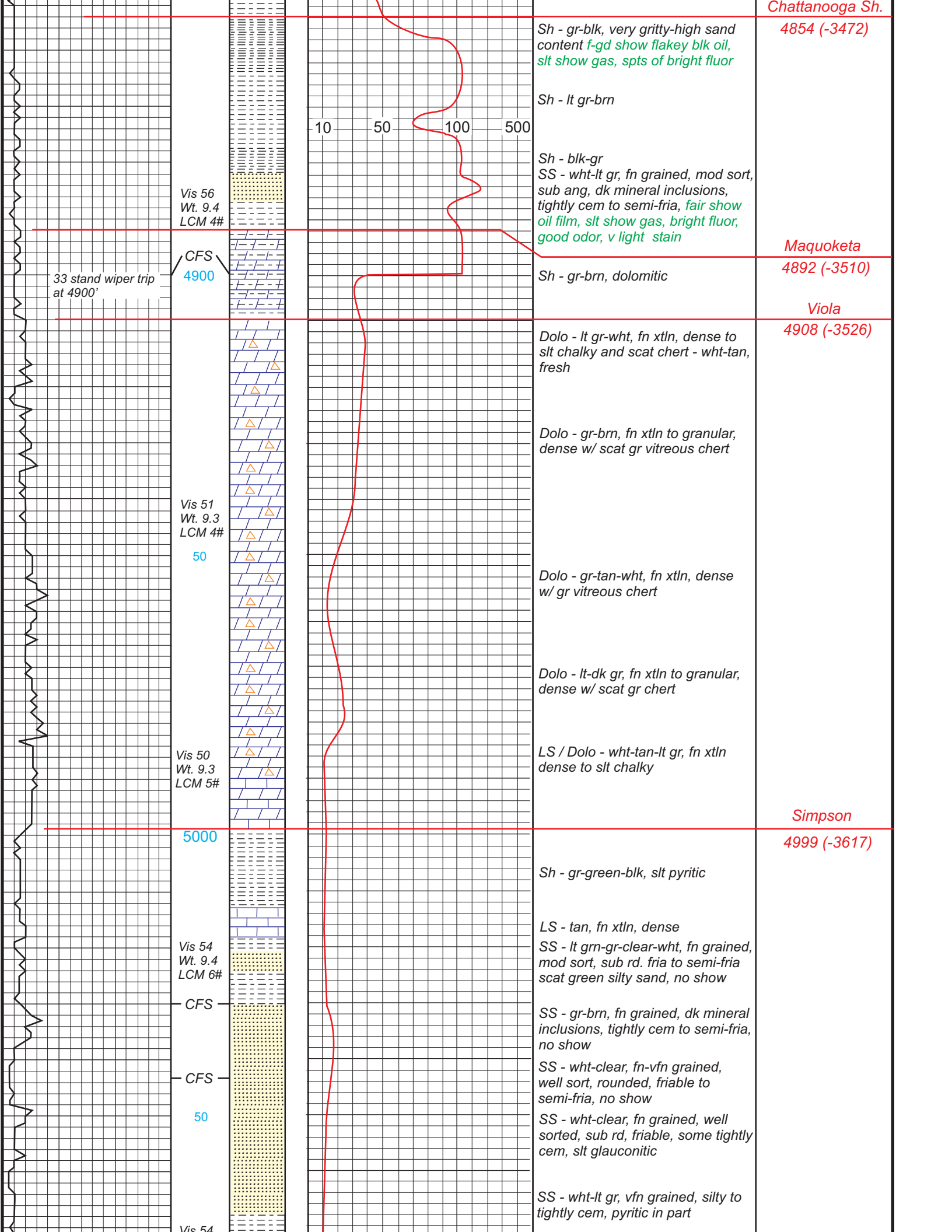
4400

Sh - lt-dk gr-green w/ LS - tan-gr,
dense

Sh - blk carb





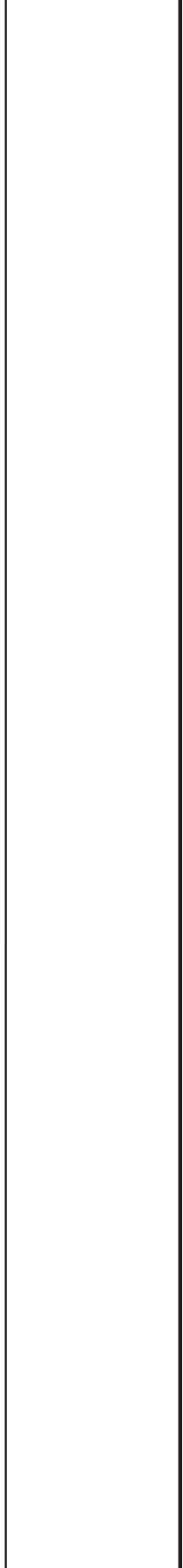
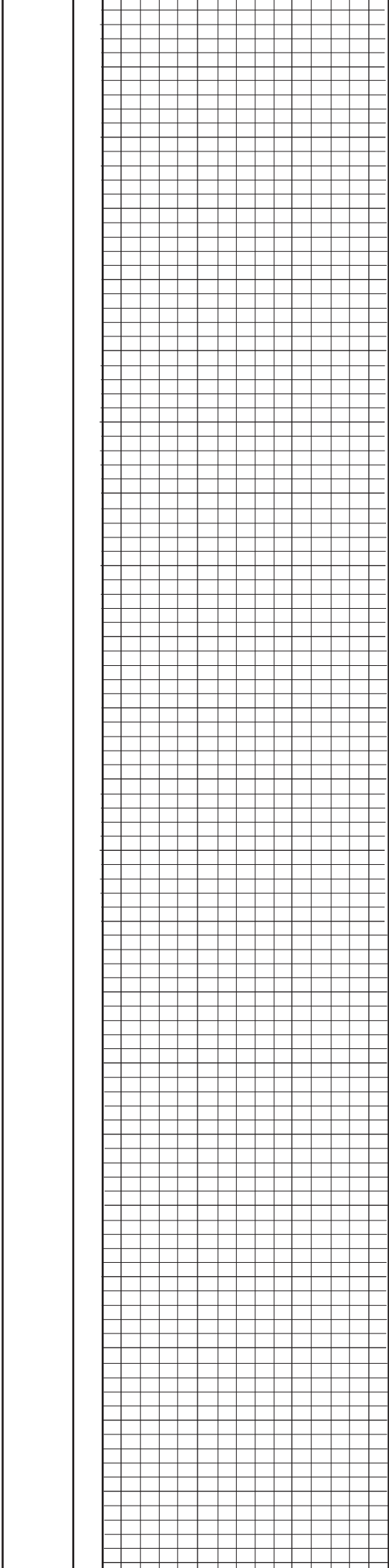
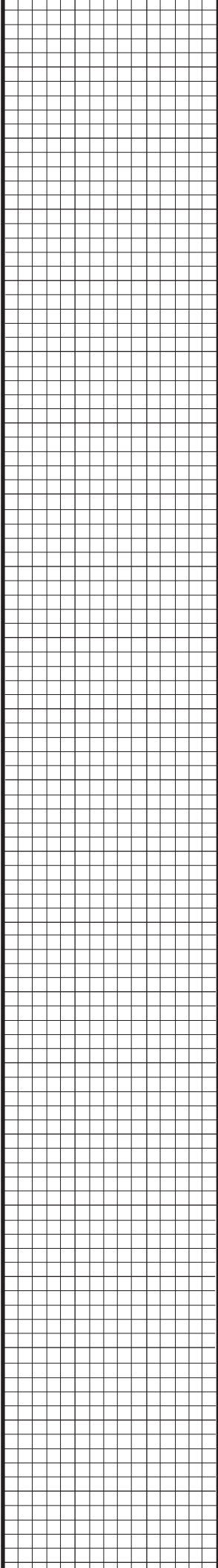


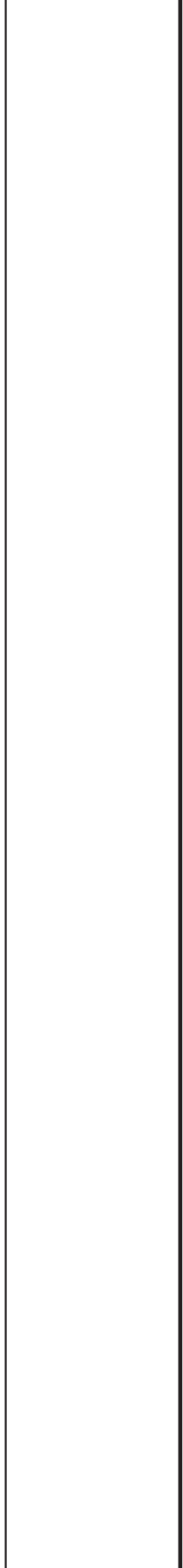
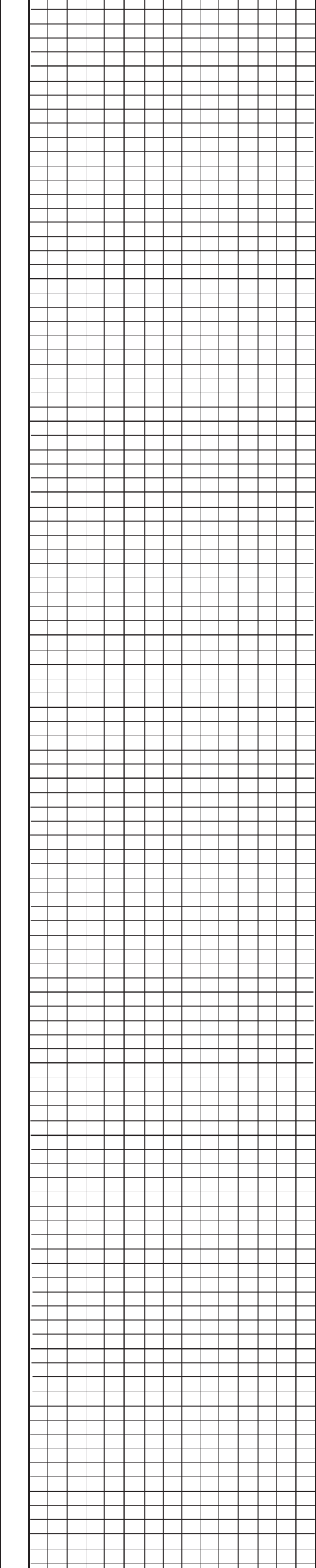
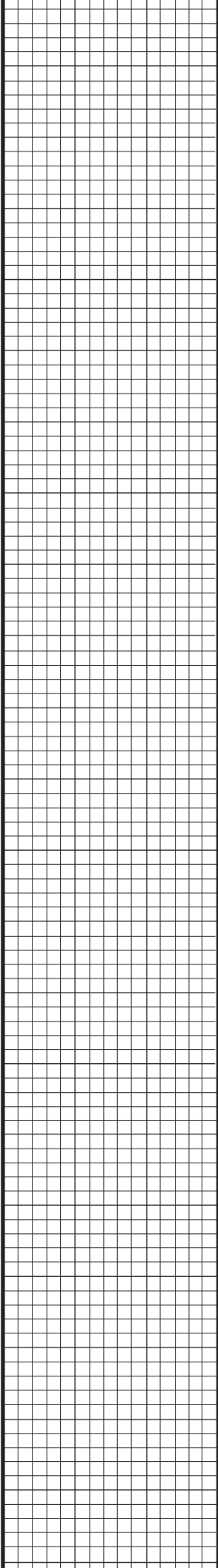
Vis 34
Wt. 9.5
LCM 6#

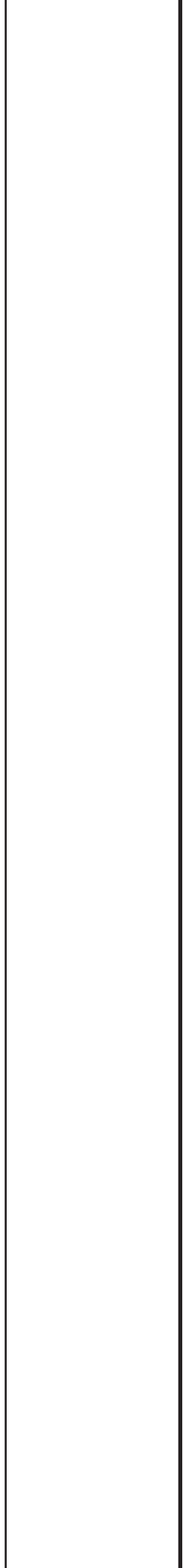
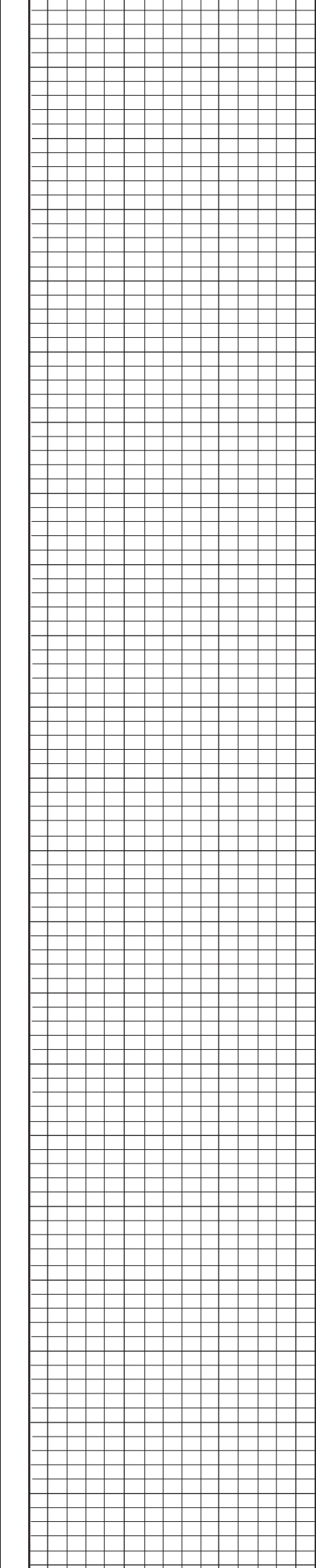
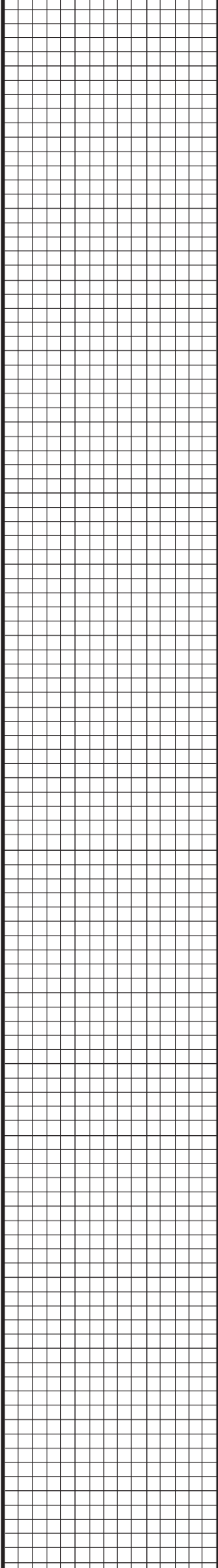
RTD 5078'

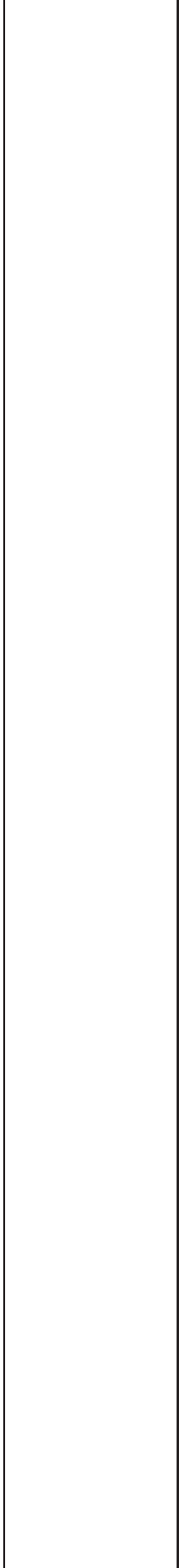
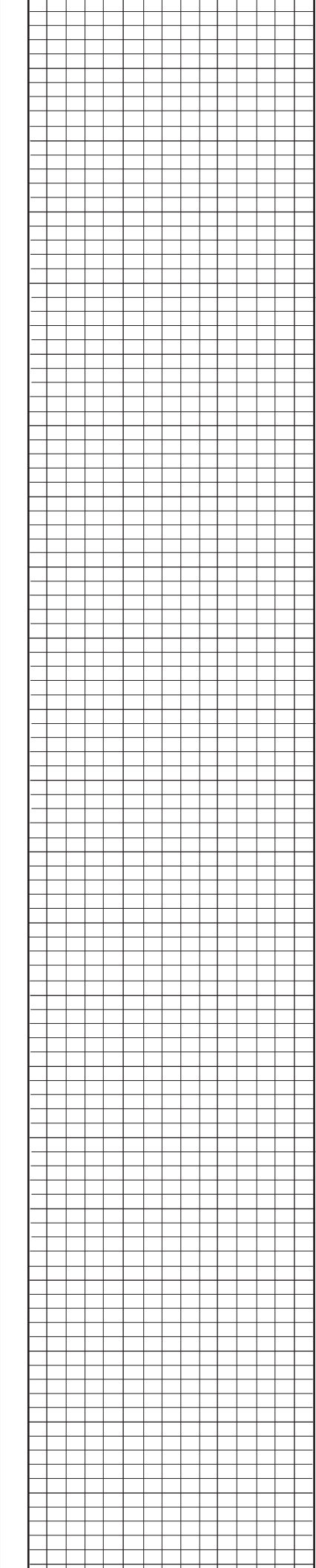
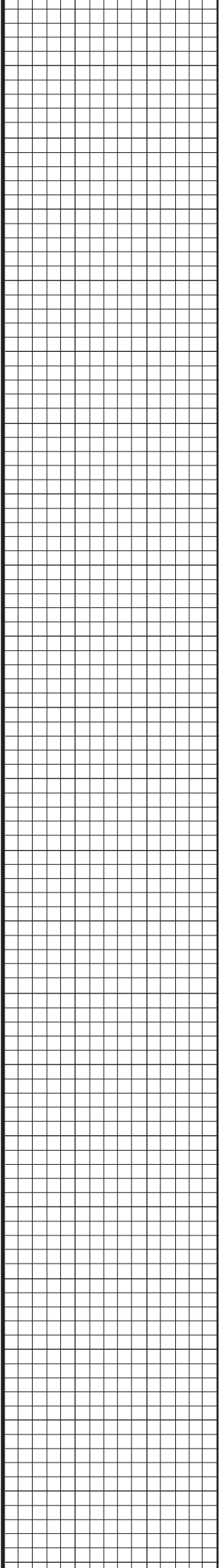
5100

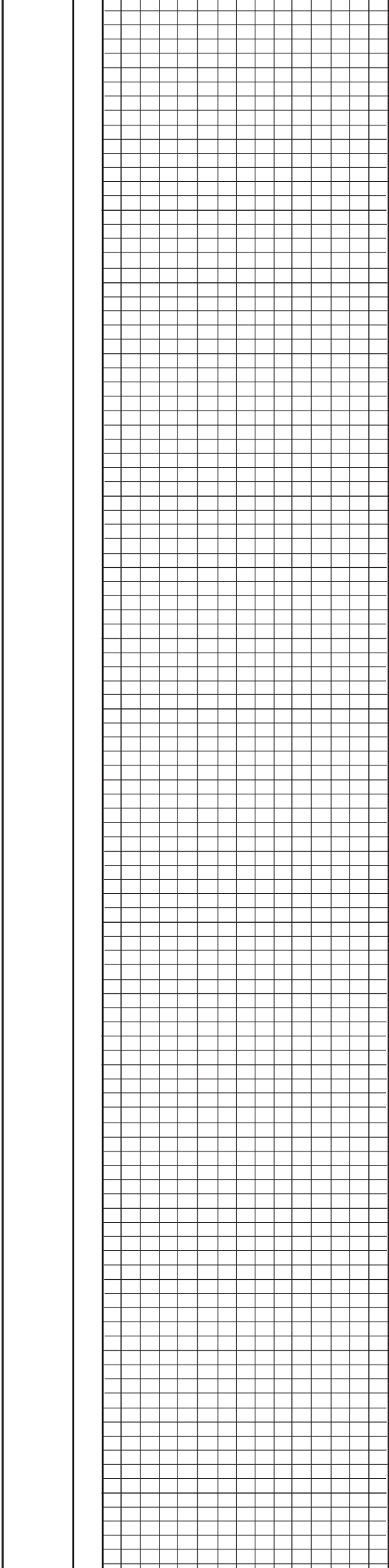
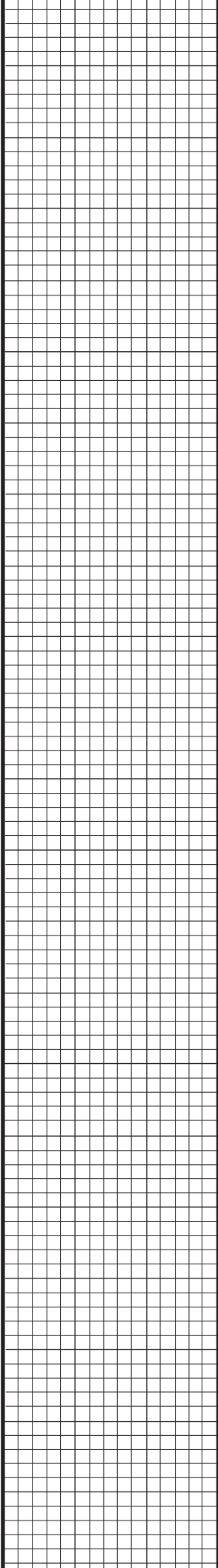
Sh - lt gr-blk

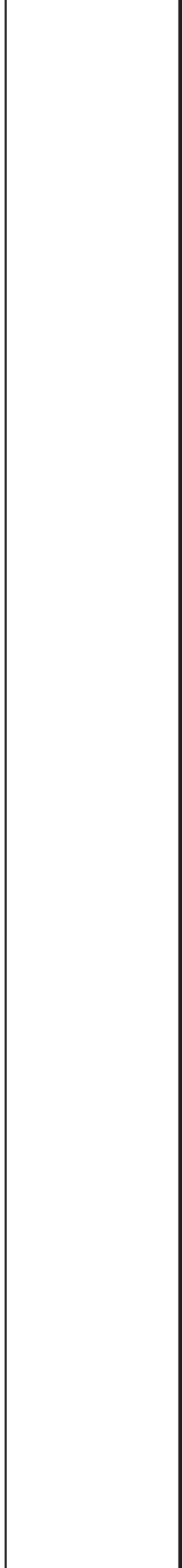
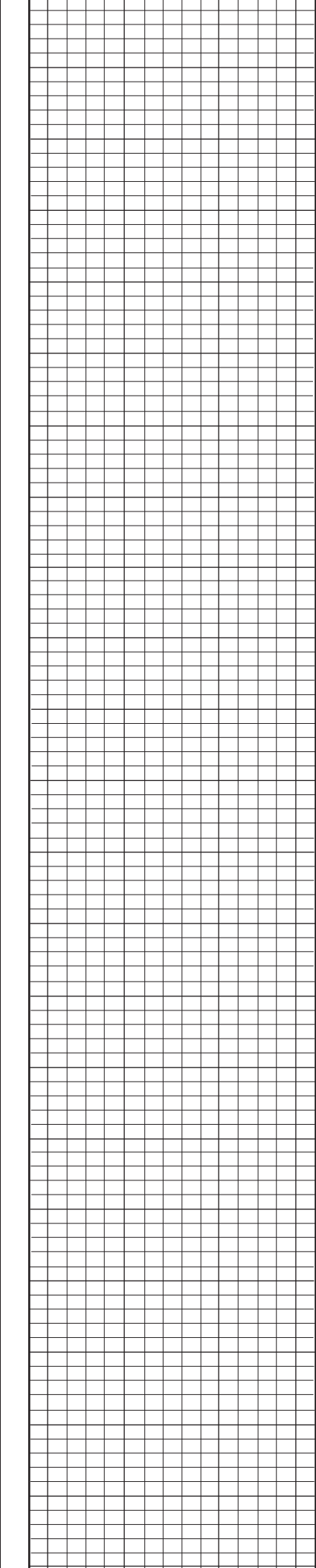
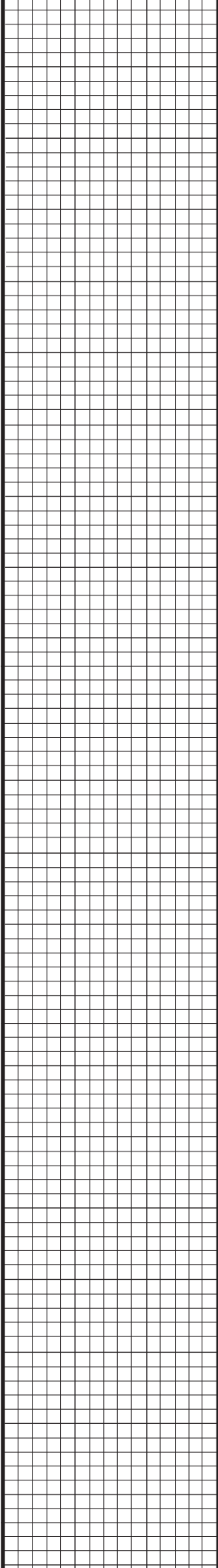


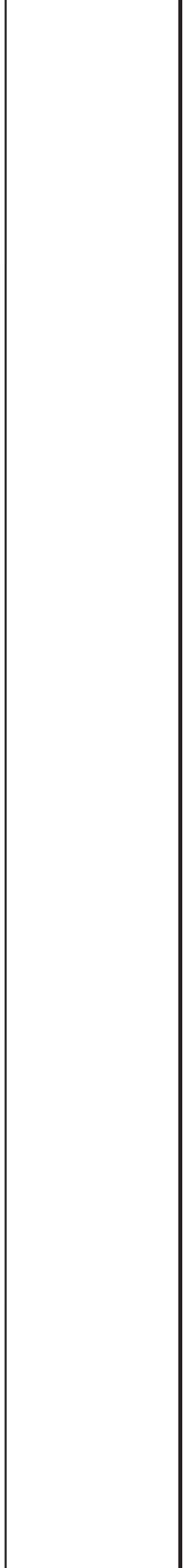
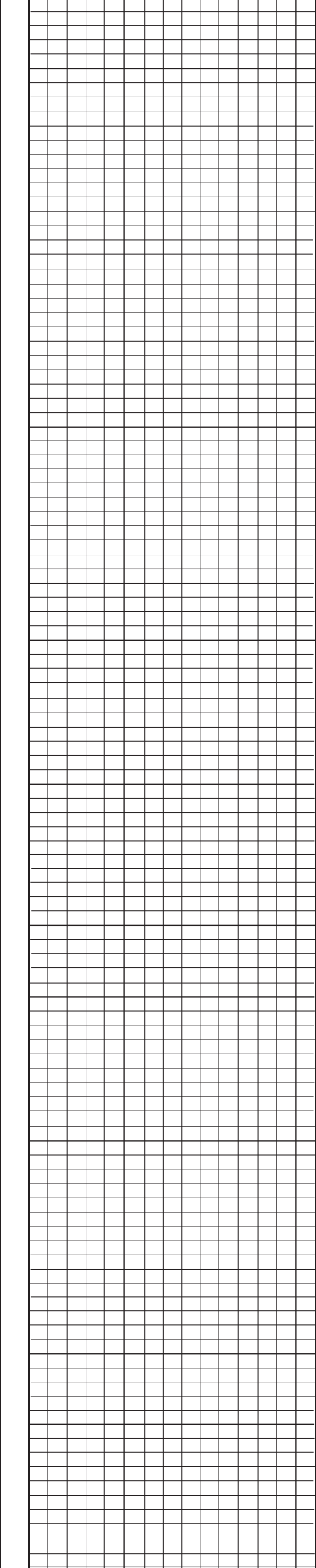
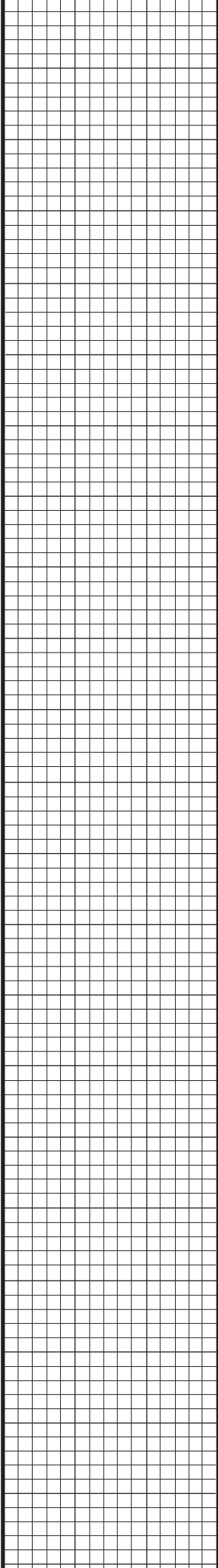


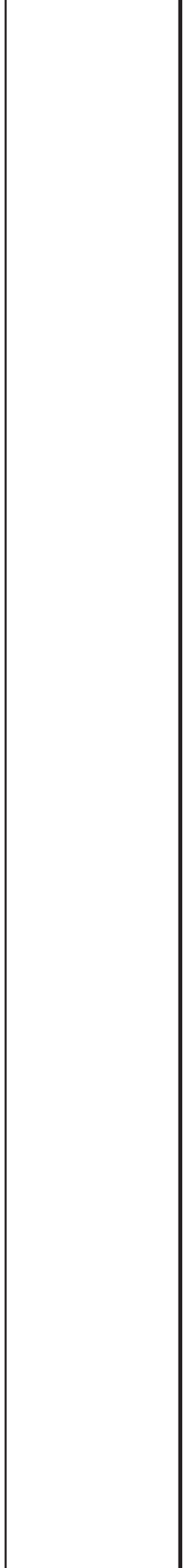
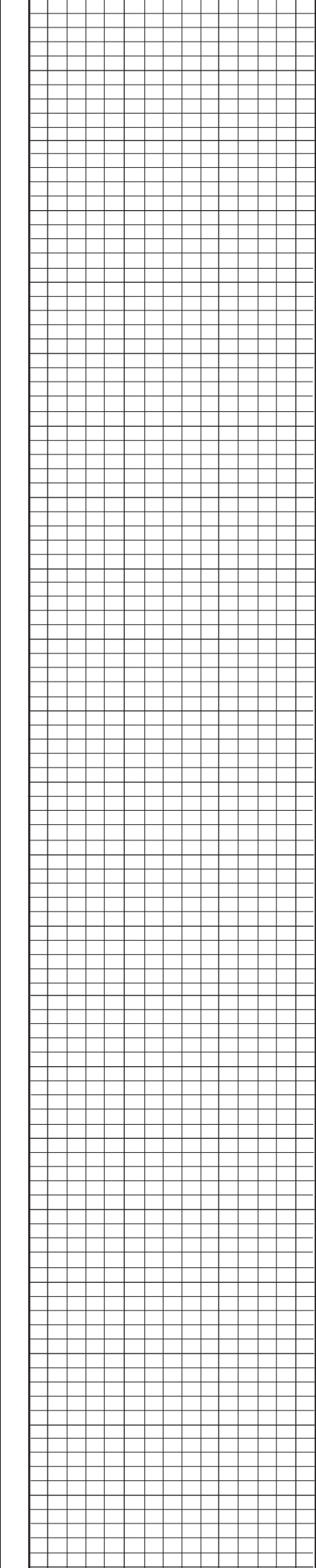
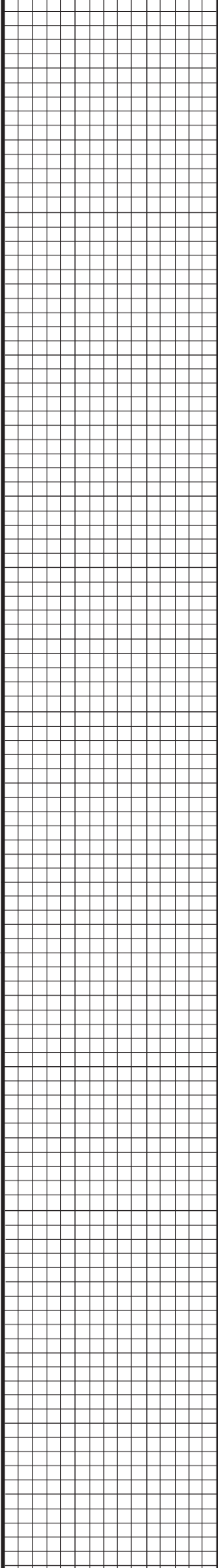


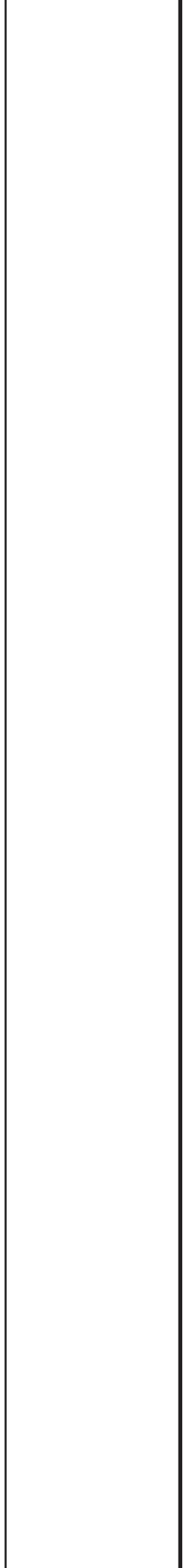
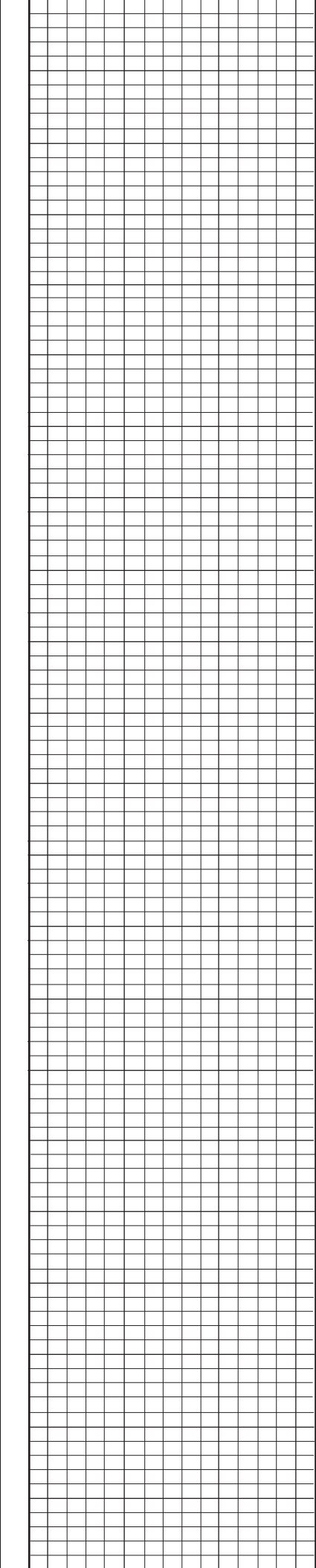
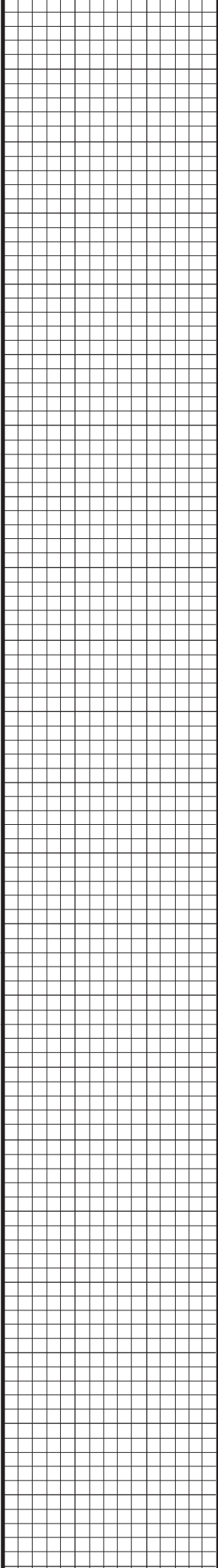


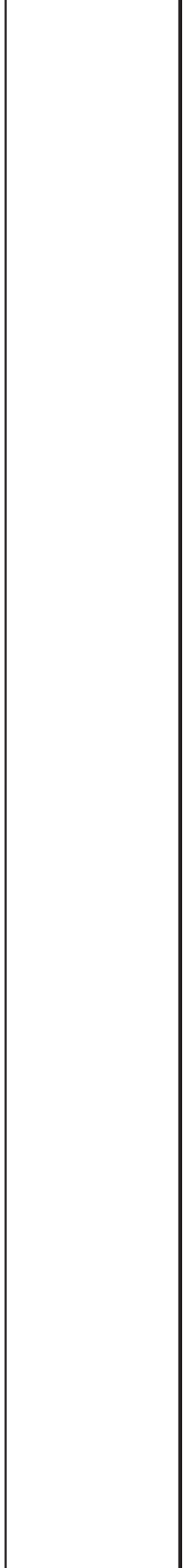
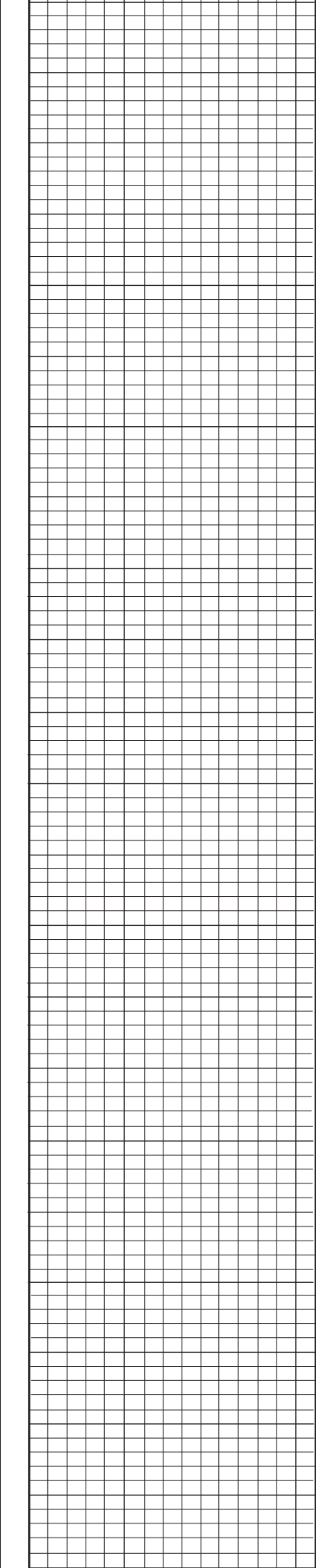
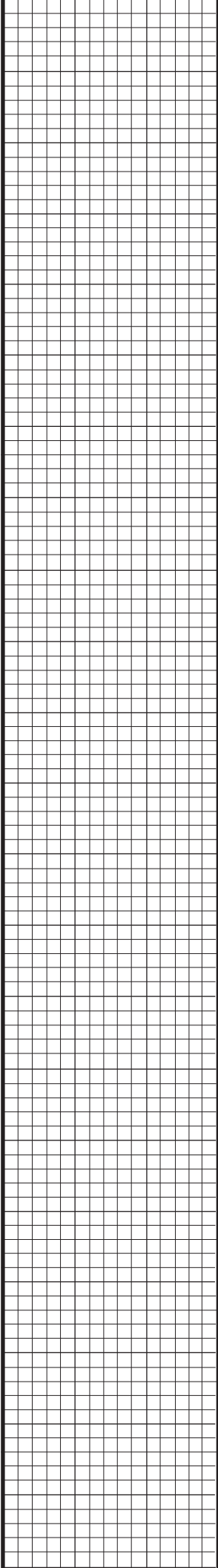


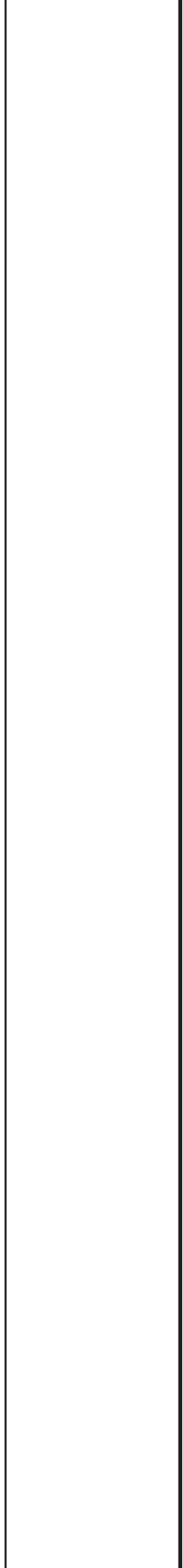
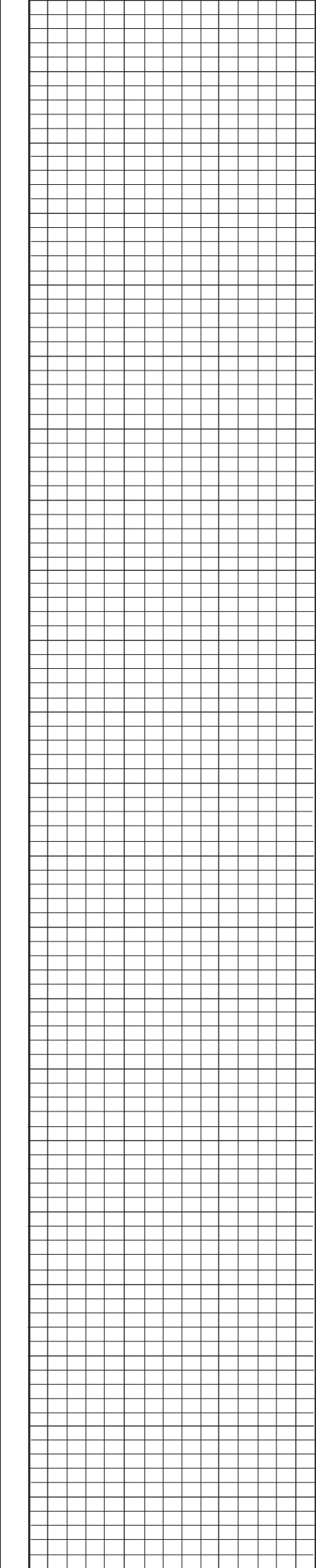
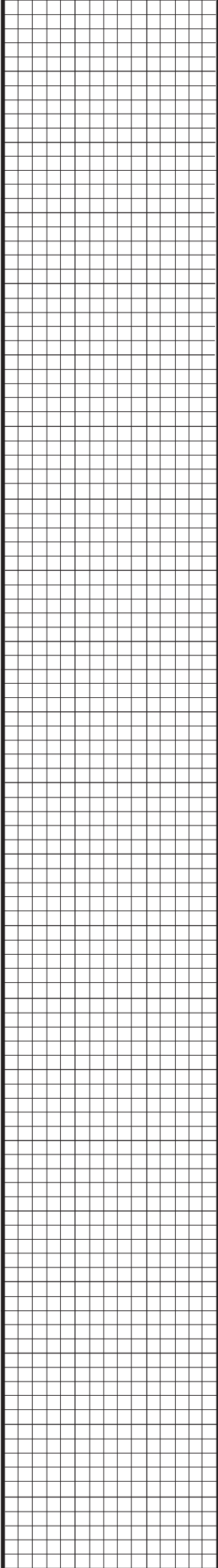


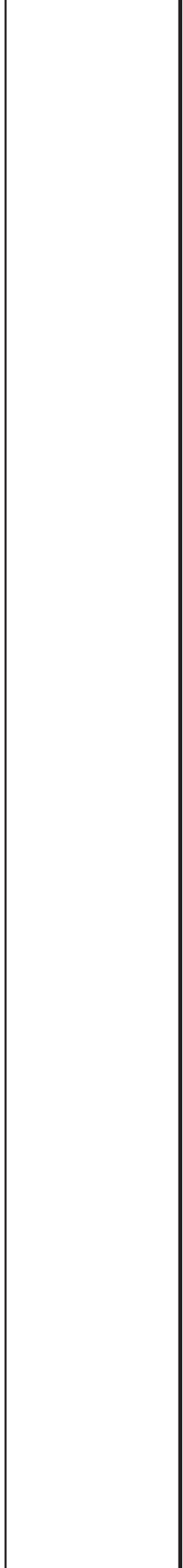
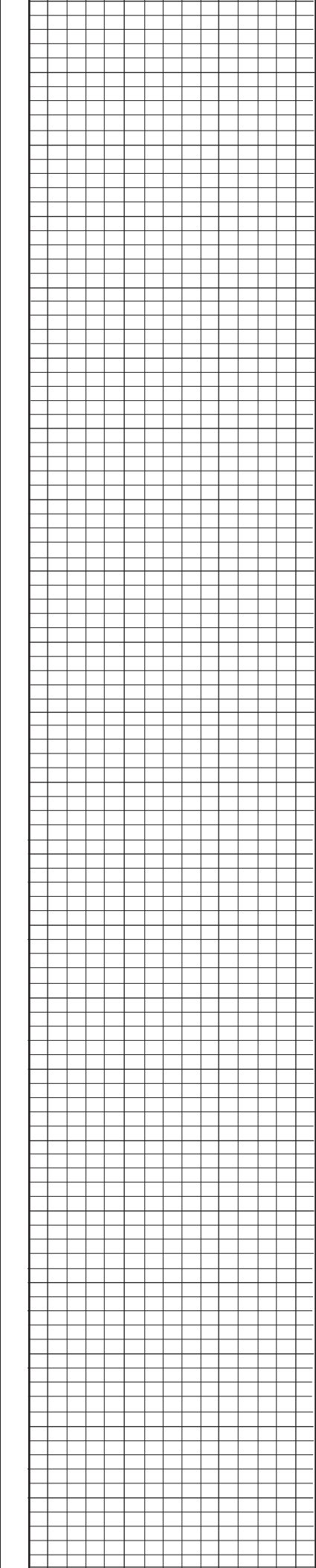
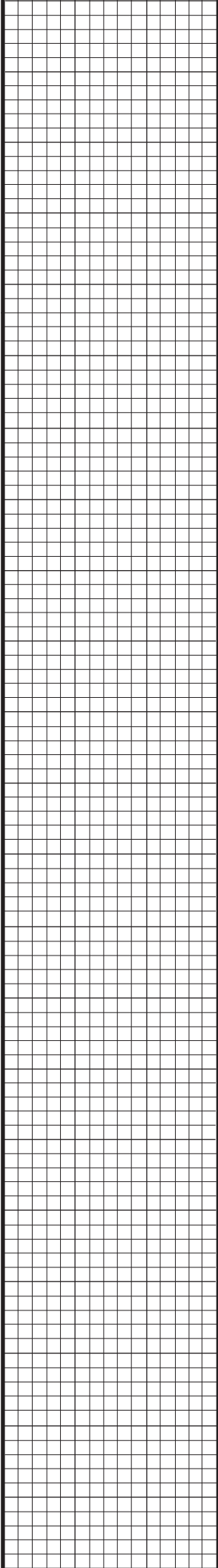


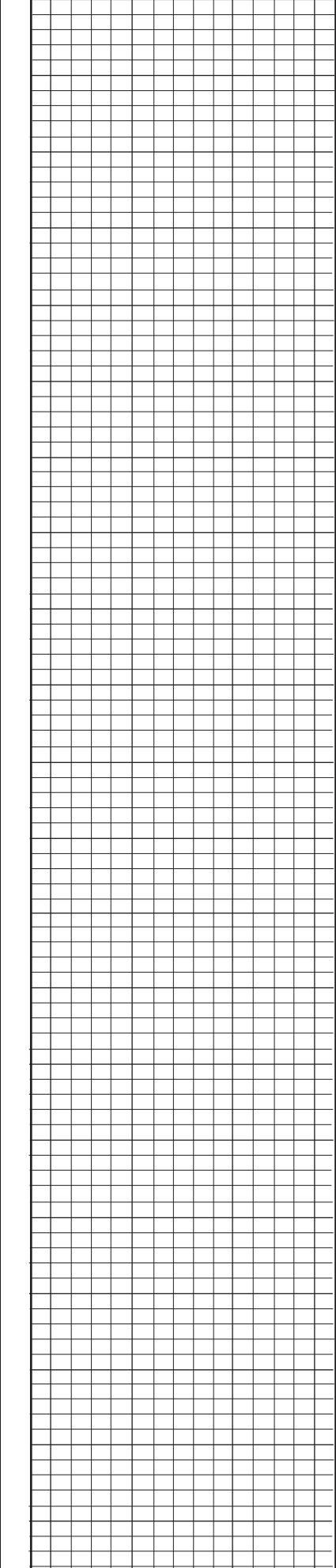
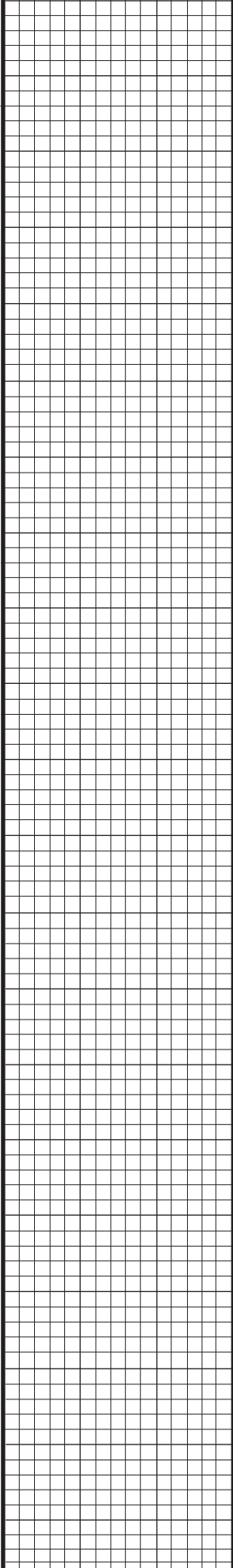












Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



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

January 31, 2013

Randy Newberry
N-10 Exploration, LLC
124 N MAIN
PO BOX 195
ATTICA, KS 67009

Re: ACO1
API 15-007-23967-00-00
Medicine River Ranch D8
NE/4 Sec.10-34S-11W
Barber 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,
Randy Newberry

N-10 EXPLORATION, LLC

P.O. Box 195

Attica, Kansas 67009

Phone: 620-254-7251 ~ Fax: 620-254-7281

Email: rboil@sctelcom.net

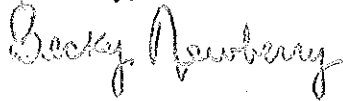
January 31, 2013

Kansas Corporation Commission
130 S. Market – Room 2078
Wichita, KS 67202

RE: Request confidentiality

This letter is to request in writing that the Medicine River Ranch D8's ACO-1, located in W/2 SE SE NE of Section 10, Township 34 South, Range 11 West, Barber County, Kansas with API # 15-007-23967-0000 be held confidential for a period of two years.

Sincerely,



Becky Newberry
Managing Member