



KANSAS CORPORATION COMMISSION 1113140
OIL & GAS CONSERVATION DIVISION

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 # _____

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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- 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

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total 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

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



1113140

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base 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. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

| | |
|---|---|
| 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> 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 |
| _____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone | | | | |
| | | | | |

| 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: _____ _____ |
|--|---|---|

FED ID # 48-1214033
 Shop # (620) 437-2661
 Cellular # (620) 437-7582
 Office # (316) 303-9515
 Office Fax # (316) 263-0432
 MC ID# 165290

Hurricane Services, Inc.
Cementing & Circulating Division
 250 N. Water, Suite 200
 Wichita, KS 67202

Shop Address: 3613A Y Road
 Madison, KS 66860

Customer:
 EDGEWOOD MANAGEMENT CO.
 PO BOX 196
 GAS, KS 66742

Invoice Date: 11/11/2012
 Invoice #: 0008500
 Lease Name: WILSON
 Well #: H-3
 County: ALLEN

| Date/Description | HRS/QTY | Rate | Total |
|--|----------|--------|------------|
| 11/8/12 - See attached work ticket #100179 of BB | 1.00 | 790.00 | 790.00 |
| Pump truck mileage one way #201 | 45.00 | 3.25 | 146.25 |
| 70/30 Pozmix cement | 118.00 | 11.40 | 1,345.20 T |
| Gel 2% | 208.00 | 0.30 | 62.40 T |
| Flocele | 30.00 | 1.85 | 55.50 T |
| Gel fush ahead | 200.00 | 0.30 | 60.00 T |
| Water truck #106 | 3.50 | 84.00 | 294.00 |
| Water transport #143/151 | 3.50 | 84.00 | 294.00 |
| City water charge | 4,600.00 | 0.01 | 59.80 T |
| Pickup truck mileage one way #290 | 45.00 | 1.50 | 67.50 |
| Bulk truck #201 | 5.48 | 51.75 | 283.59 |
| 2 7/8" Top rubber plug | 1.00 | 25.00 | 25.00 T |

BID PRICE

Net Invoice 3,483.24
 Sales Tax: (7.55%) 121.40
 Total 3,604.64

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!

Paid
 11/14/12
 EMC #2038

Hurricane Services, Inc.
 3613 A Y Road
 Madison, KS 66860
 Office # 620-437-2661
 Brad Cell # 620-437-6755

Ticket Number 100179
 Location Madison
 Foreman Brad Butler

Cement Service ticket

| Date | Customer # | Well Name & Number | Sec./Township/Range | County |
|--|----------------------|---------------------------------|---------------------|--------------|
| 11-8-12 | Phone # 620-496-6926 | Wilson * H-3 | 26-24s-17e | Allen |
| Customer Mark Heinz Edgewood Management Company | | Mailing Address P.O. Box 196 | City Gas | State Ks. |
| | | | Zip 66742 | |

| | | |
|-----------------------------|----------------|---------------|
| Job Type: <u>Longstring</u> | Truck # | Driver |
| Hole Size: <u>6 3/4"</u> | <u>201</u> | <u>Kelly</u> |
| Hole Depth: <u>1225'</u> | <u>202</u> | <u>Cody</u> |
| Bridge Plug: | <u>106</u> | <u>Daniel</u> |
| Packer: | <u>143-151</u> | <u>Mark</u> |
| | | <u>Austin</u> |

| Quantity Or Units | Description of Services or Product | Pump charge | |
|-------------------|------------------------------------|---------------------|----------------|
| <u>45</u> | Mileage | \$3.25/Mile | <u>146.25</u> |
| <u>118 sacks</u> | <u>70/30 Pozmix cement</u> | <u>11.40</u> | <u>1345.20</u> |
| <u>208 lbs</u> | <u>Gel 2%</u> | <u>.30</u> | <u>62.40</u> |
| <u>30 lbs</u> | <u>Flocote 1/4" P/SK</u> | <u>1.85</u> | <u>55.50</u> |
| <u>200 lbs</u> | <u>Gel > Flush Ahead</u> | <u>.30</u> | <u>60.00</u> |
| <u>3 1/2 Hrs</u> | <u>water Truck</u> | <u>84.00</u> | <u>274.00</u> |
| <u>3 1/2 Hrs</u> | <u>water Truck</u> | <u>84.00</u> | <u>274.00</u> |
| <u>4600 Gals</u> | <u>water</u> | <u>13.00 P/1000</u> | <u>59.80</u> |
| <u>45 miles</u> | <u>T/R + 2%</u> | <u>1.50</u> | <u>67.50</u> |
| | <u>Wireline Services</u> | <u>50.00</u> | <u>M/C</u> |
| <u>5.48 Tons</u> | <u>Bulk Truck</u> | \$1.15/Mile | <u>283.59</u> |
| <u>1</u> | <u>Plugs 2 7/8" Top Rubber</u> | <u>25.00</u> | <u>25.00</u> |
| | | Subtotal | <u>3483.24</u> |
| | | Sales Tax | <u>117.38</u> |
| | <u>"As Bid"</u> | Estimated Total | <u>3600.62</u> |

Remarks: Rig up to 2 7/8" Tubing, Break circulation with 10 Bbl water, 10 Bbl Gel Flocc, circulate Gel around to condition hole. Mixed 118 sacks 70/30 Pozmix cement w/ 2% Gel and 1/4" P/SK of Flocote. Shut down - wash out Pump and Lines - Release Top Rubber Plug - Displace Plug with 3 1/2 Bbl water. Final Pumping at 350 PSI. Bumped Plug to 950 PSI - close Tubing at 950 PSI. Good cement returns to surface with 4 Bbl slurry.

"Thank you"

Witnessed by Mark Heinz
 Customer Signature

Hodown Drilling

Steven Leis and Andrew King, owners
P.O. Box 92
Yates Center, KS 66783
(719) 210-8806 (620) 330-6328

DATE: November 8, 2012
INVOICE #

BILL TO:
Mark Heinz
P.O. Box 196
Gas, KS 66742

FOR: Wilson H-3

| DESCRIPTION | HOURS | RATE | AMOUNT |
|---|-------|-----------|--------|
| set 20' of 8 5/8" surface casing with 10 sacks cement drilled 1225', (6 3/4" hole) run long string Plugged back hole from 1225' to 1170' with 30 sacks cement drill pits water hauling | | included | |
| | | SUBTOTAL | \$ |
| | | TAX RATE | |
| | | SALES TAX | |
| | | OTHER | |
| | | TOTAL | \$ |

Make checks payable to Hodown Drilling
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

THANK YOU FOR YOUR BUSINESS!

