



KANSAS CORPORATION COMMISSION 1114259
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: _____



1114259

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
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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
_____ 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
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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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Form	ACO1 - Well Completion
Operator	CEC Operations LLC
Well Name	Musson 2-A
Doc ID	1114259

Tops

Name	Top	Datum
latan	2222	
stalnaker	2265	
kansas city	2995	
cleveland	3030	
bartlesivell	3402	
mississipain	3414	
simpson	3770	
arbuckel	3824	

BIT DATA		CASING & DRILLING ASSEMBLY				Pit Vol. 250	PUMP #1	PUMP #2	HYDRAULICS	
Bit Size	7 7/8	Size	8 5/8	set @	305	Ft	Pipe Capacity	Ideco	Ideco	ANNULAR VELOCITY
Bit Type	Varrel r	Size		set @		Ft	52 bbls	6 x14	6 x14	Drill Pipe 106 ft/min
Bit No.	3	Size		set @		Ft	Ann Volume	54 SPM	0 SPM	Drill Collar 145 ft/min
Jets (32nd)		Size		set @		Ft	246 bbls	5.52 G/ST	0.00	CIRCULATING PRESSURE
18	18	Drill Collar		6 1/4	2.25	283	Hole Volume	298 GPM		400 psi
16		Drill Collar					298 bbls	7.10 BPM		BOT. UP 35 min
		Drill Pipe		4 1/2	3.826	3562	Total Cir Vol	Total GPM	Total BPM	SURF. TO BIT 7.3 min
		H.W. Drill Pipe					548 bbls	298	7.10	TOT. CIR TIME 77 min

Sample From	<input checked="" type="checkbox"/> Flowline	<input type="checkbox"/> Pit	Mud Properties			Calculate Alkalinity		<input type="checkbox"/> Check	HYDRAULICS		
Flowline Temperature (°F)			94						138 Ft/Sec	Nozzle Area	
Time Sample Taken			9am						Horsepower	0.5 HP/SQ.In	0.693 Sq In
Depth (ft)			3,845						Impact Force	3.9 lbf/Sq. In	ECD
Mud Weight (ppg)			9.0						Press Loss at Bit	153psi	9.2 ppg
Mud Gradient (psi/ft)			0.4680						Press Loss at Bit	38%	
Funnel Viscosity @		°F	47					Recommended Equipment			
Plastic Visc.cp @		°F	14					Centrifuge <input type="checkbox"/>	Shaker <input type="checkbox"/>	Desander <input type="checkbox"/>	Other <input type="checkbox"/>
Yield Point (lb/100ft2)			9					Degasser <input type="checkbox"/>	Desilter <input type="checkbox"/>		
Gel Strength (lb/100ft2) 10-sec			1					Recommended Mud Properties			
Gel Strength (lb/100ft2) 10-min			12					By Authority of:	<input checked="" type="checkbox"/> Company Representative	<input type="checkbox"/> Drilling Contractor	
Gel Strength (lb/100ft2) 30-min			14					Mud Wt:	9.1	Filtrate:	8-10cc
Filtrate API (cm3/30 min)			10.2					LCM:	10.0	Excess Lime:	lb/lb
Filtrate API HTHP (cm3/30 min)								RECOMMENDED TOURLY TREATMENT			
Cake Thickness (/32nds)			2					GEL> for a 50sec/qt viscosity to LOG			
Solids Content (% by vol)			4.8					Caustic> 3 sks Days			
Water Content (% by Vol.)			95.2					Lignite> 2 sks Days			
Sand Content (% by vol)			.5								
Bentonite Content (lb/bbl)								Be sure and break circulation at least once on your way back to bottom			
pH <input checked="" type="checkbox"/> Strip <input type="checkbox"/> Meter			9.5					from Logging			
Alkalinity Mud (Pm) cm3 N/50 Acid			.8								
Alkalinity, Pf / Mf			.3/1.9								
Chloride (mg/l)			1000					HULLS> for 10-12#/bbl. LCM---CHECK OFTEN			
Total Hardness as Calcium (mg/l)			40					Water> for a 8.9-9.1#/gal mud wt.			
Oil Content (% by vol)											
LCM (lb/bbl)			10					Jet and clean pits tourly BUT keep plenty of volume in case of loss			
Excess Lime (lb/bbl)								KEEP HOLE FULL AT ALL TIMES!			

Solids Analysis						MUD LOOKS GOOD—Thank you guys											
L.G. Solids		%	H.G. Solids		%												
L.G. Solids		ppb	H.G. Solids		ppb												
Corrected Solids		%	Average Sp. Gr.														
Chemicals	Gel	Lime	Soda Ash	Caustic	Lignite	Drispac	Hulls	Pallets	Shrink	Cedar	Maxi						
Cost per Unit	11.35	7.80	26.21	46.00	18.80	258.00	11.15	18.50	15.50	16.65	21.20						
Starting Inventory	285	3	31	48	36	1	230	15	15	33	32						
Chemicals Received																	
Closing Inventory	280	3	31	45	34	1	210	10	5	30	30						
Chemicals Used	5	0	0	3	2	0	20	5	10	3	2						
Daily Cost	56.75	0.00	0.00	138.00	37.60	0.00	223.00	92.50	155.00	49.95	42.40						
Chemicals																	
Cost Per Unit												Est. Daily Cost: 834					
Staring Inventory												Est. Cumulative Cost: 18,601					
Chemicals Received												Est. Drayage: 0					
Closing Inventory												Est. Taxes: 39					
Chemicals Used																	
Daily Cost																	

TECHNICAL REP:	Gary Fleming	ADDRESS:	Enid	PHONE:	580-541-2158
CELL PHONE NO.		WAREHOUSE:		PHONE:	
ANS. SERVICE:					

IN CONSIDERATION OF THE FURNISHING OF THIS REPORT AND ORAL SUGGESTIONS, IT IS AGREED THAT NO RECOMMENDATIONS MADE HEREON SHALL BE CONSTRUED AS AUTHORIZING THE INFRINGEMENT OF ANY VALID PATENT, AND IT IS AGREED THAT CODY MUD COMPANY SHALL NOT BE LIABLE FOR ANY DAMAGES

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

February 14, 2013

tyler satterthwaite
CEC Operations LLC
800 MAIN ST, STE 208
WINFIELD, KS 67156

Re: ACO1
API 15-035-24479-00-00
Musson 2-A
SE/4 Sec.19-34S-03E
Cowley 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,
tyler satterthwaite

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130 S. Market, Rm. 2078
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CEC Operations LLC
800 MAIN ST, STE 208
WINFIELD, KS 67156

Re: ACO-1
API 15-035-24479-00-00
Musson 2-A
SE/4 Sec.19-34S-03E
Cowley County, Kansas

Dear tyler satterthwaite :

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 09/01/2012 and the ACO-1 was received on February 14, 2013 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department