



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1115358
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: _____



1115358

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Flatirons Resources LLC
Well Name	Lawrence 42-23
Doc ID	1115358

Tops

Name	Top	Datum
Anhydrite - top	2132	589
Anhydrite - base	2167	554
Topeka	3672	-951
Heebner	3927	-1206
Lansing	3962	-1241
Base Kansas City	4291	-1570
Marmaton	4317	-1596
Pawnee	4428	-1707
Ft. Scott	4470	-1749
Johnson zone	4537	-1836
Mississippian	4621	-1900



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Flatirons Resources LLC

23-16s-28w Lane Co KS

303 E. 17th. AVE
STE 940
Denver CO 80203
ATTN: Clayton Erickson

Lawrence 42 23

Job Ticket: 51315

DST#: 1

Test Start: 2012.12.07 @ 12:25:15

GENERAL INFORMATION:

Formation: **Marmaton-Pawnee**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 14:35:45

Time Test Ended: 19:36:00

Test Type: Conventional Bottom Hole (Initial)

Tester: Mike Roberts

Unit No: 65

Interval: 4365.00 ft (KB) To 4445.00 ft (KB) (TVD)

Reference Elevations: 2721.00 ft (KB)

Total Depth: 4445.00 ft (KB) (TVD)

2711.00 ft (CF)

Hole Diameter: 6.88 inches Hole Condition: Fair

KB to GR/CF: 10.00 ft

Serial #: 8646

Press @ Run Depth: 108.48 psig @ ft (KB)

Capacity: 8000.00 psig

Start Date: 2012.12.07 End Date: 2012.12.07

Last Calib.: 2012.12.07

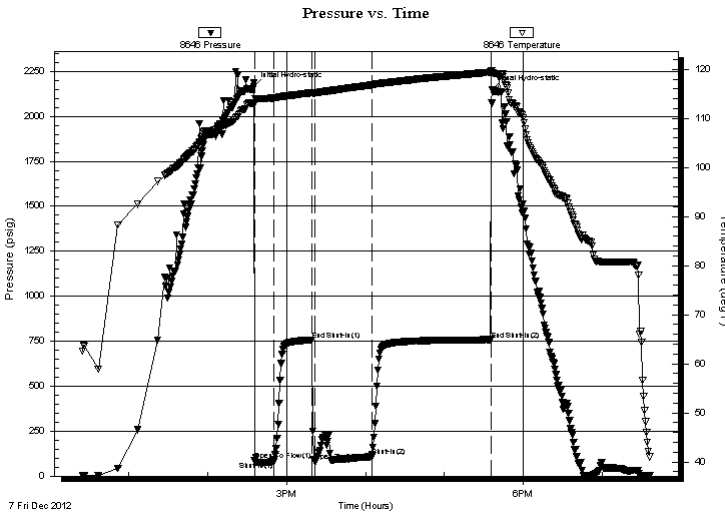
Start Time: 12:25:15 End Time: 19:36:00

Time On Btm: 2012.12.07 @ 14:35:15

Time Off Btm: 2012.12.07 @ 17:36:30

TEST COMMENT: IF: Built to 8" blow
IS: No return blow
FF: BOB in 8 min.
FS: No return blow

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2163.82	113.26	Initial Hydro-static
1	85.64	113.03	Open To Flow (1)
15	79.75	114.15	Shut-In(1)
45	757.63	115.25	End Shut-In(1)
46	82.18	115.18	Open To Flow (2)
90	108.48	116.82	Shut-In(2)
180	758.49	119.43	End Shut-In(2)
182	2147.80	119.32	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	GIP= 588 ft	0.00
92.00	gcom 5%g 25%o 60%m	1.29
62.00	gcom 10%g 30 %o 60%m	0.87

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Flatirons Resources LLC

23-16s-28w Lane Co KS

303 E. 17th. AVE

Lawrence 42 23

STE 940

Job Ticket: 51315

DST#: 1

Denver CO 80203

Test Start: 2012.12.07 @ 12:25:15

ATTN: Clayton Erickson

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 44.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 5.57 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 1800.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
0.00	GIP= 588 ft	0.000
92.00	gcom 5%g 25%o 60%m	1.291
62.00	gcom 10%g 30 %o 60%m	0.870

Total Length: 154.00 ft Total Volume: 2.161 bbl

Num Fluid Samples: 0

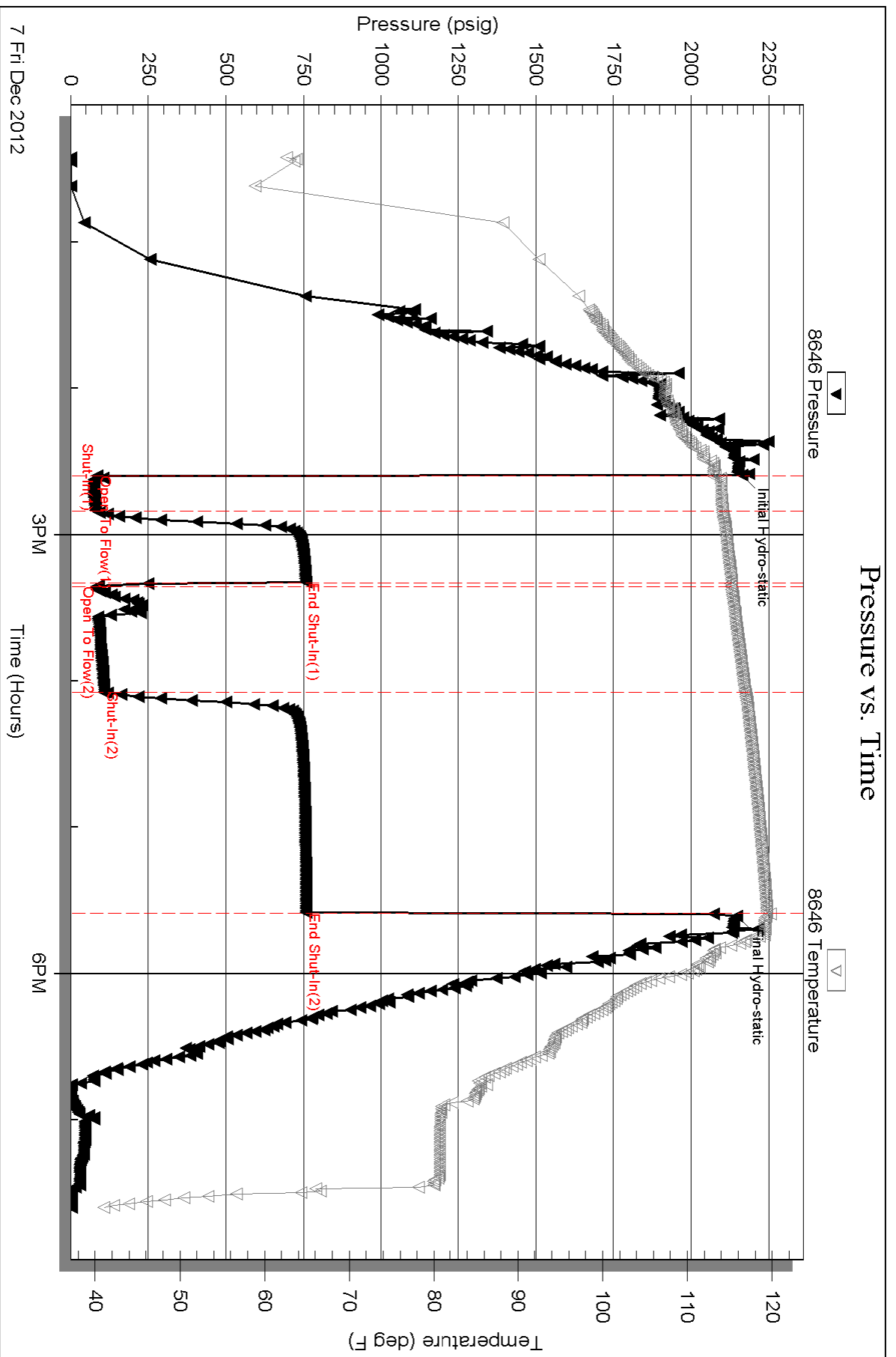
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Flatirons Resources LLC

23-16s-28w Lane Co KS

303 E. 17th. AVE
STE 940
Denver CO 80203
ATTN: Clayton Erickson

Lawrence 42 23

Job Ticket: 51316

DST#: 2

Test Start: 2012.12.08 @ 07:27:15

GENERAL INFORMATION:

Formation: **Ft. Scott**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 09:35:00

Time Test Ended: 13:46:00

Test Type: Conventional Bottom Hole (Reset)

Tester: Mike Roberts

Unit No: 65

Interval: 4447.00 ft (KB) To 4498.00 ft (KB) (TVD)

Reference Elevations: 2721.00 ft (KB)

Total Depth: 4498.00 ft (KB) (TVD)

2711.00 ft (CF)

Hole Diameter: 6.88 inches Hole Condition: Fair

KB to GR/CF: 10.00 ft

Serial #: 8646

Press @ Run Depth: 38.07 psig @ ft (KB)

Capacity: 8000.00 psig

Start Date: 2012.12.08 End Date: 2012.12.08

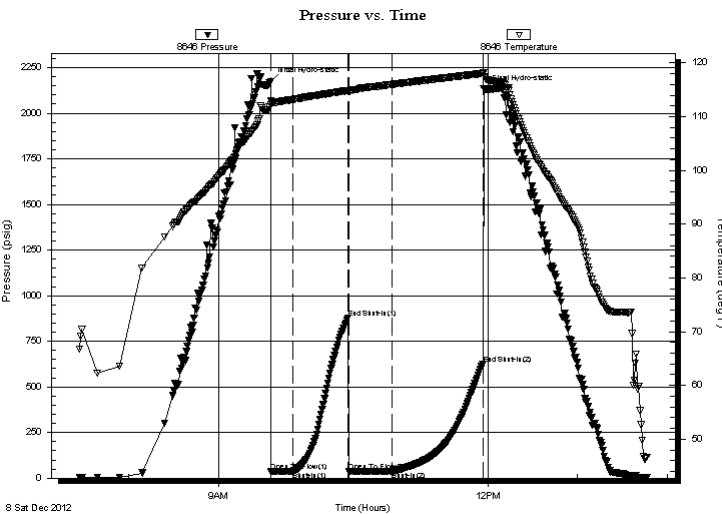
Last Calib.: 2012.12.08

Start Time: 07:27:15 End Time: 13:46:00

Time On Btm: 2012.12.08 @ 09:34:45

Time Off Btm: 2012.12.08 @ 11:57:45

TEST COMMENT: IF: Built to weak surface blow
IS: No return blow
FF: Weak surface blow that died in 10 min.
FS: No return blow.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2173.27	112.96	Initial Hydro-static
1	35.56	112.30	Open To Flow (1)
15	36.39	113.18	Shut-In(1)
52	878.93	114.89	End Shut-In(1)
53	38.82	114.63	Open To Flow (2)
82	38.07	116.01	Shut-In(2)
142	625.67	118.04	End Shut-In(2)
143	2128.15	117.46	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
20.00	mud with oil spots	0.28

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Flatirons Resources LLC

23-16s-28w Lane Co KS

303 E. 17th. AVE
STE 940
Denver CO 80203
ATTN: Clayton Erickson

Lawrence 42 23

Job Ticket: 51316

DST#: 2

Test Start: 2012.12.08 @ 07:27:15

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 44.00 sec/qt

Cushion Volume:

bbf

Water Loss: 5.59 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 1800.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
20.00	mud w ith oil spots	0.281

Total Length: 20.00 ft Total Volume: 0.281 bbf

Num Fluid Samples: 0

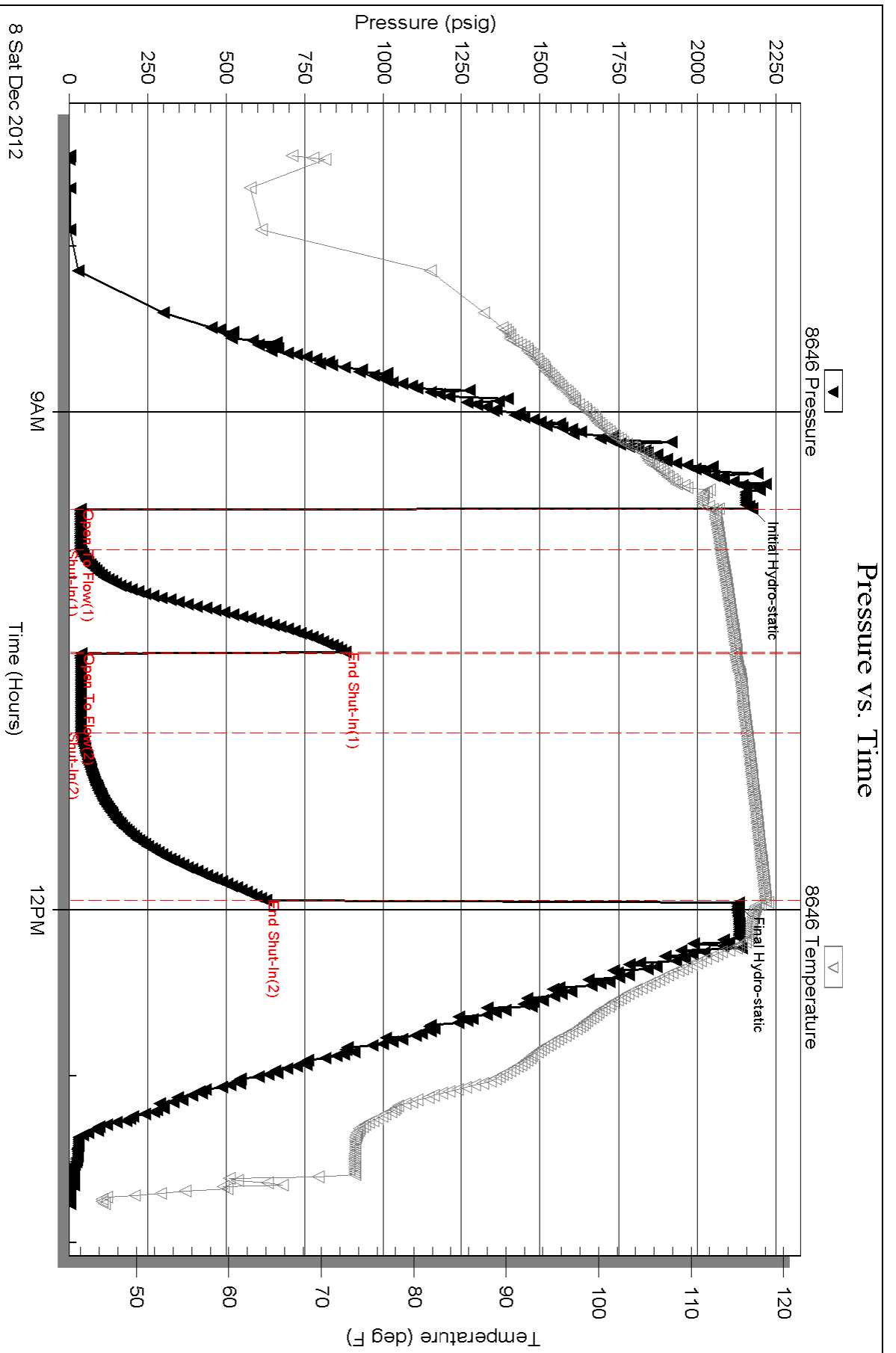
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



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 12, 2013

John Marvin
Flatirons Resources LLC
303 E 17TH AVE STE 940
DENVER, CO 80203

Re: ACO1
API 15-101-22410-00-00
Lawrence 42-23
NE/4 Sec.23-16S-28W
Lane 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,
John Marvin

ALLIED OIL & GAS SERVICES, LLC 059118

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:

DATE <u>11-30-12</u>	SEC. <u>23</u>	TWP. <u>16S</u>	RANGE <u>28W</u>	CALLED OUT <u>16:00</u>	ON LOCATION <u>19:20</u>	JOB START <u>20:57</u>	JOB FINISH <u>21:18</u>	
LEASE <u>Lawrence</u>		WELL # <u>42-23</u>	LOCATION <u>96W to 283N to 4W</u>			COUNTY <u>Lane</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)			to Pawnee Ave N 1/2 mile W. in lane				<u>1.01</u>	<u>6.5</u>

CONTRACTOR Val #7

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 221

CASING SIZE 8 5/8 DEPTH 209.93

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 20'

CEMENT LEFT IN CSG. 20', 1.27 bbls, 5.3 sacks

PERFS. _____

DISPLACEMENT 12.5 bbls

EQUIPMENT

PUMP TRUCK # 398 CEMENTER Patrick Helgeson HELPER Trent Hall

BULK TRUCK # 3411 DRIVER Kevin Warghaus

BULK TRUCK # _____ DRIVER _____

OWNER Flat Iron Resources

CEMENT AMOUNT ORDERED 200 sx's A + 3% C.C. + 1 206 Cwt

COMMON	<u>200</u>	@ <u>17.90</u>	<u>3580.00</u>
POZMIX		@	
GEL	<u>3</u>	@ <u>23.70</u>	<u>70.20</u>
CHLORIDE	<u>7</u>	@ <u>64.00</u>	<u>448.00</u>
ASC		@	
HANDLING	<u>215 x</u>	@ <u>2.48</u>	<u>533.20</u>
MILEAGE	<u>9.83 x 55 x</u>	<u>2.60</u>	<u>1277.90</u>

REMARKS:

Pumped 5 bbls Fresh water.

Pumped 48 bbls cement @ 15.2ppg - 200 sx's

Displaced 12.5 bbls Fresh water

Leave 20 feet 1.27 bbls 5.3 sx's cement casing

Circulate 5 bbls, to

Circulated 5 bbls 21 sx's cement to surface

TOTAL 6037.90

540.65

491.50

SERVICE 5909.30

CHARGE TO: Flat Iron Resources

STREET _____

CITY _____ STATE _____ ZIP _____

DEPTH OF JOB 209

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE @ _____

MILEAGE Hum 55.50 @ 7.00 423.50 350.00

MANIFOLD Hum 55.50 @ 4.40 242.00 220.00

TOTAL 2082.25

2177.25

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.

PLUG & FLOAT EQUIPMENT

1 8 5/8 Sledge with Valve N/C

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

PRINTED NAME James Shu Hzi

SIGNATURE [Signature]

SALES TAX (if Any) 258.18

TOTAL CHARGES 8214.84 7991.55

DISCOUNT 2078 2053.71

IF PAID IN 30 DAYS 2397.46 disc

net 5594.09 before tax



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 39215

LOCATION Orkney 125

FOREMAN Fuzz4

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-9-12	2955	Lawrence 42-23	23	16	28	Lawe
CUSTOMER Flatiron Resources			shubs			
MAILING ADDRESS			C. Pughog			
CITY			112 W			
STATE			WVA			
ZIP CODE						
TRUCK #	DRIVER	TRUCK #	DRIVER			
399	Damon M					
566	Jeremy S.					

JOB TYPE 2-stage HOLE SIZE 77/8 HOLE DEPTH 4625' CASING SIZE & WEIGHT 5 1/2 15 1/2
 CASING DEPTH 4615' DRILL PIPE _____ TUBING _____ OTHER DU Tool (2107)
 SLURRY WEIGHT 14.7-12.5 SLURRY VOL 1.36-1.89 WATER gal/sk _____ CEMENT LEFT in CASING 22
 DISPLACEMENT 109.3 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Ual #7. Cont # 11, 2, 4, 6, 8, 9, 11, 13, 56
Bas Rets Bot 57-84 DU Tool Taper 557. Ris up and circulate.
Mix + pump 500gal mud flush followed by 180 sks class 'A' 1090 salt
290 gal w/5# Kalsal per sk. Wash pump and lines. Prop plus and displace
60 Bbs water, 50 1/2 Bbs mud list press 650* land plus @ 1300*
Drop DU Bomb wait 10 min open Tool @ 1000* Circ 1 hr. Mix 20 sks Mal
30 sks RH. Mix 425 sks 60/40 pos 890 gal 1/4# Flo-sal down 5 1/2 csg, Wash
pump and lines. Drop plus and displace 50 1/2 Bbs water 700*
1:00 close DU Tool @ 1600* Cement did circulate 30 Bbs to pit

Thanks Fuzz4 & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401c	1	PUMP CHARGE	3020.00	3020.00
5406	30	MILEAGE	5.00	150.00
5407A	28.89 ton	Tow mileage Delivery	6.67	144.50
11045	180 sks	Class 'A' cement	17.65	3177.00
1111	861 #	salt	.45	387.45
1110A	900 #	Kalsal	.56	504.00
1118B	3610 #	Bentlonite	.25	902.50
1131	4753 sks	60/40 pos	15.10	7172.50
1144G	500 gal	Mud Flush	1.00	500.00
		Flo-sal	2.82	N/A
4159	1	5 1/2 - AFU Flood shoe	413.00	413.00
4130	9	5 1/2 - Centralizers	58.00	522.00
4104	2	5 1/2 - Bas Rets	276.00	552.00
4283	1	5 1/2 - DU Tool w/ latchdown	3850.00	3850.00
		subtotal		22597.95
		less 1090		2259.80
		subtotal		20338.15
		SALES TAX		1019.50
		ESTIMATED TOTAL		21357.65

Ravin 3737

AUTHORIZATION Brett Hildebrand

TITLE completed

DATE _____

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.

255351