

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1125258

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

		DECODURTION		
WELL	HISTORY	 DESCRIPTIOI 	N OF WELL	& LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from Cast / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	
Name:	Lease Name: Well #:
Wellsite Geologist:	
C C	
Purchaser:	
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used?
OG GSW Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Chloride content: ppm Fluid volume: bbls
	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec Two S R East West
GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or	
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date Recompletion Date	

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 Approved by: Date:

	Side Two	1125258
Operator Name:	Lease Name:	Well #:
Sec TwpS. 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 (Attach Additional She	eets)	Yes No	L		n (Top), Depth an	d Datum Top	Datum
Samples Sent to Geolog	ical Survey	Yes No				iop	Datam
Cores Taken Electric Log Run Electric Log Submitted Electronically (If no, Submit Copy)		<pre>Yes No</pre> NoNoVes NoNo					
List All E. Logs Run:							
		CASING		ew Used			
		Report all strings set	-conductor, surface, inte	ermediate, producti	ion, 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: —— Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated						ement Squeeze Record I of Material Used)	Depth		
TUBING RECORD:	Siz	:e:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed P	Producti	on, SWD or ENHF	₹.	Producing N	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITIO	N OF G	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit A	Comp. AC <i>O-5)</i>	Commingled (Submit ACO-4)		
(If vented, Subr	nit ACO	-18.)		Other (Specify)						

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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 agen or contractor. I have read and understand the "GENBRAL TERMS AND CONDITIONS" listed on the reverse side. PRINTED NAME STEVEN CRAIC STONATURE Junear Or	UNKTRUCK DRIVER Devid Scarting UNKTRUCK DRIVER Nich Shumabics DRIVER Nick Shumabics Mice and Strange Shumabics Driver also of the state Devict also of the state Devict also of the state Present also of the state REET P. C. Can 38 TV Can the state of the State	ALLIED OLL ITTO P.O. BOX 93999 SOUTHLAKE, TEXAS 76092 1-6-75 SEC. TWP/7 RANGE COLUMN (Direle one) COLUMN (Direle one) RACTOR // Reveal / Coconin ORABY (Direle one) INACTOR // Reveal / Coconin COLUMN (Direle one) INACTOR // Reveal / Coconin COLUMN (Direle one) DEPTH STORE // Coconin COLUMN (DIRENTER / Coconin COLUMN (DIREN
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	785-798-2300	DATE SIGNED CONTONER ACCEPTANCE OF
98 98L 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PICE SCITY KS 67660 MET SERVICES, INC. PERFORMED TI MET YOLK SERVICE WA MET YOLK SERVICE	the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRAUTY provisions. wust be signed by customer of customer's абеит ряюк то start or work ок регичену ог соорз START ог work ок регичену ог соорз
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Services, Inc.	Off: 785-798-2300	SWIFT P. O. Bax 466
2/4/2013	DATE	
23808	INVOICE #	Invoice

PO Box 391

- AcidizingCementTool Rental

We Ap	576D-D 330 276 290 288 104 581D 583D 583D	S 74D	Net 30	TERMS
precia	Sal Dra Sal Sal		#2	Well No.
We Appreciate Your Business!	Pump Charge - Port Collar Swift Multi-Density Standard (MIDCON II) Flocele D-Air Sand (20/40 Brady) Port Collar Tool Rental Service Charge Cement Drayage Subtotal Subtotal Sales Tax Scott County	Mileape - 1 Way	French L	Lease
lusiness	ty tal Standard (MID)	DESCRIPTION	Scott	County
	SON IJ	ION	H-D Oilfield Servi	Contractor
			Oil	Well Type
	1 170 50 3 2 1 250 746.33 746.33		L L	┼╌┤
Total	Job Sacks Lb(s) Gallon(s) Sack(s) Each Sacks Ton Miles	UM	Development	Well Category
	1,250.00 2.00 250.00 1.00 1.00 1.00	UNIT PRICE	Cement 5-1/2" P	Job Purpose
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