



KANSAS CORPORATION COMMISSION 1120798  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
August 2013

Form must be Typed  
Form must be Signed  
All blanks must be Filled

Confidentiality Requested:

Yes  No

**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                      Date Reached TD                      Completion Date or  
Recompletion Date                                           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

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: \_\_\_\_\_



1120798

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Cholla Production, LLC
Well Name	ANDERSON FARMS 1-1
Doc ID	1120798

All Electric Logs Run

DUAL INDUCTION
DUAL COMP SONIC
MICRO
BOREHOLE COMP SONIC



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

Cholla Production, LLC

**1-2s-30w Decatur, KS**

10390 Bradford rd. STE #201  
Littleton, CO 80127

**Anderson Farms #1-1**

ATTN: Clayton Erickson

Job Ticket: 51201

**DST#: 1**

Test Start: 2013.02.26 @ 21:57:00

## GENERAL INFORMATION:

Formation: **LKC "A"**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 00:18:45

Time Test Ended: 05:36:30

Test Type: Conventional Bottom Hole (Initial)

Tester: Kevin Mack

Unit No: 43

**Interval: 3731.00 ft (KB) To 3800.00 ft (KB) (TVD)**

Reference Elevations: 2791.00 ft (KB)

Total Depth: 3800.00 ft (KB) (TVD)

2786.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Good

KB to GR/CF: 5.00 ft

**Serial #: 6799**

**Inside**

Press @ Run Depth: 78.82 psig @ 3732.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.02.26

End Date:

2013.02.27

Last Calib.:

2013.02.27

Start Time: 21:57:05

End Time:

05:36:29

Time On Btm:

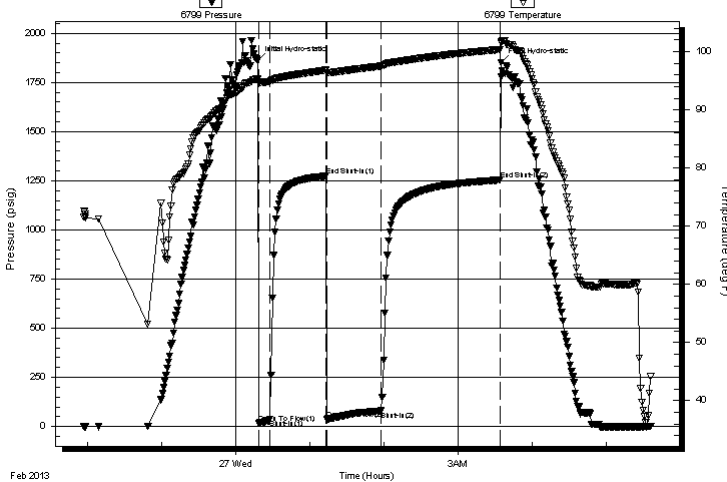
2013.02.27 @ 00:17:45

Time Off Btm:

2013.02.27 @ 03:35:00

**TEST COMMENT:** 10 - IF- 1" Blow built to 2"  
45 - IS- No Return  
45 - FF- Blow built to 6 1/2"  
90 - FS- No Return

Pressure vs. Time



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1862.67	95.27	Initial Hydro-static
1	17.12	94.82	Open To Flow (1)
10	36.56	94.88	Shut-In(1)
55	1273.38	96.80	End Shut-In(1)
56	37.61	96.45	Open To Flow (2)
100	78.82	97.51	Shut-In(2)
196	1252.85	100.35	End Shut-In(2)
198	1850.47	101.73	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
60.00	MW 85W 15M	0.30
80.00	MW 70W 30M	0.58
1.00	Free Oil 100o	0.01

## Gas Rates

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



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Cholla Production, LLC

**1-2s-30w Decatur, KS**

10390 Bradford rd. STE #201  
Littleton, CO 80127

**Anderson Farms #1-1**

Job Ticket: 51201

**DST#: 1**

ATTN: Clayton Erickson

Test Start: 2013.02.26 @ 21:57:00

## Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 64.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 6.80 in<sup>3</sup>

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 500.00 ppm

Filter Cake: 1.00 inches

## Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
60.00	MW 85W 15M	0.295
80.00	MW 70W 30M	0.576
1.00	Free Oil 100o	0.014

Total Length: 141.00 ft      Total Volume: 0.885 bbl

Num Fluid Samples: 0

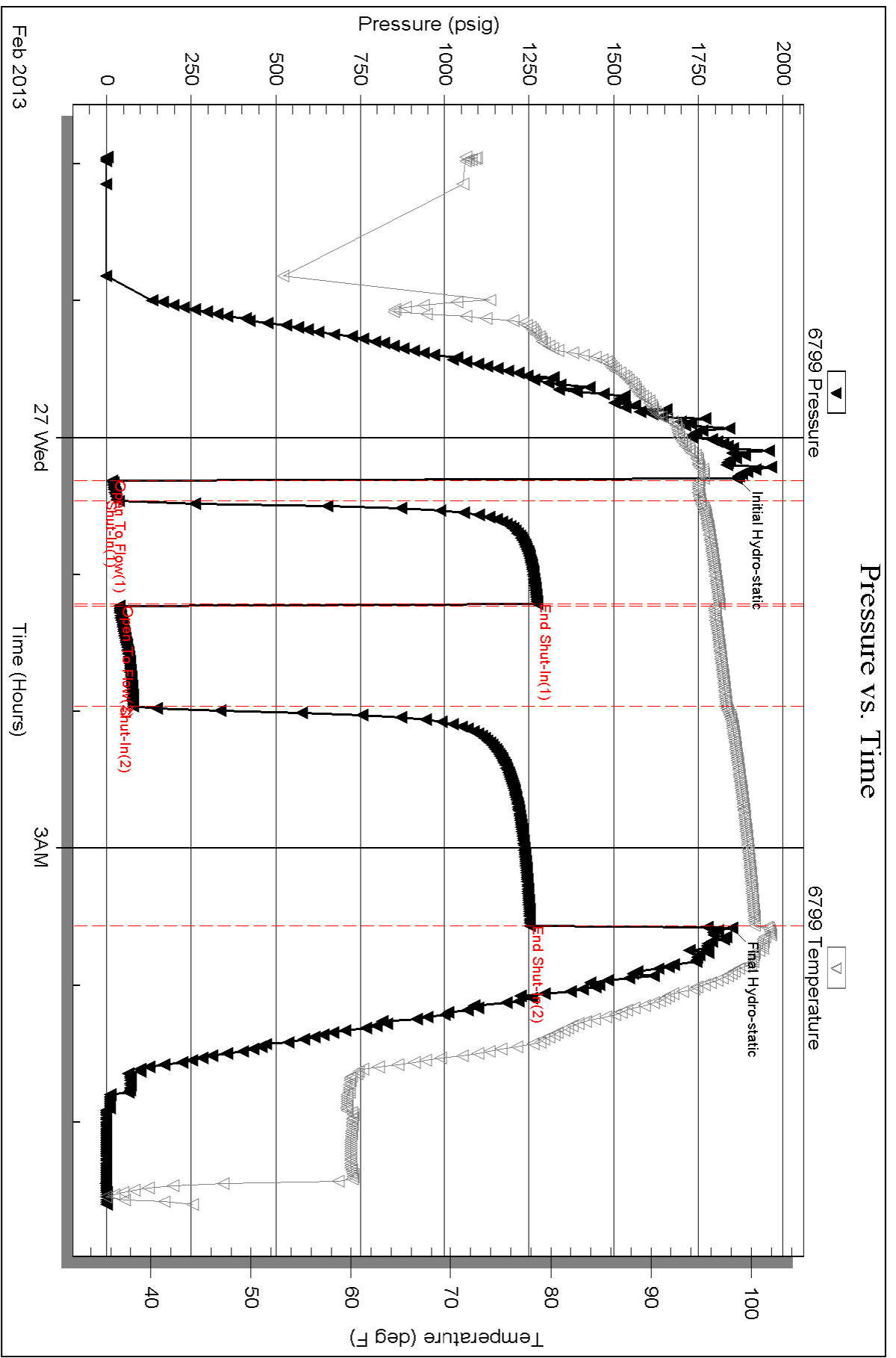
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: Sampler recovery: 150lbs pressure. 200ML Mud 1800ML Water (Oil skim on top resulting in oil spots) 2000ML total



# ALLIED OIL & GAS SERVICES, LLC 060129

Federal Tax I.D. # 20-8651476

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

SERVICE POINT: Oakley

DATE <u>2/23/23</u>	SEC. <u>1</u>	TWP. <u>2</u>	RANGE <u>30</u>	CALLED OUT	ON LOCATION	JOB START <u>2:30 PM</u>	JOB FINISH <u>3:00 PM</u>
BASE <u>Anderson Farm</u>	WELL # <u>1-1</u>	LOCATION <u>Oberlin 5E 5N 4E</u>			COUNTY <u>DeWitt</u>	STATE <u>KS</u>	
HLD OR NEW (Circle one)		<u>NEW</u>					

CONTRACTOR WW 6 OWNER Same

TYPE OF JOB <u>Surface</u>	CEMENT AMOUNT ORDERED <u>170 com 300cc</u>
COLE SIZE <u>12 1/4</u>	T.D. <u>259</u>
ASING SIZE	DEPTH <u>259</u>
UBING SIZE	DEPTH
DRILL PIPE	DEPTH
COL	DEPTH
RES. MAX	MINIMUM
FEAS. LINE	SHOE JOINT
EMENT LEFT IN CSG. <u>15'</u>	
BRFS.	
ISPLACEMENT <u>15-54</u>	

COMMON	<u>170</u>	① <u>170</u>	<u>3043<sup>00</sup></u>
POZMIX		②	
GEL	<u>3</u>	③ <u>33</u>	<u>720<sup>00</sup></u>
CHLORIDE	<u>6</u>	④ <u>64</u>	<u>384<sup>00</sup></u>
ASC		⑤	

EQUIPMENT

PUMP TRUCK	CEMENTER <u>Alan Ryan 1</u>
	HELPER <u>Craig Maggahy 2</u>
ULK TRUCK	DRIVER <u>Kevin Ryan 3</u>
ULK TRUCK	DRIVER

HANDLING	<u>183</u>	⑥ <u>3.48</u>	<u>635<sup>00</sup></u>
MILBAGE	<u>22</u>	⑦ <u>22</u>	<u>484<sup>00</sup></u>
			TOTAL <u>5523<sup>00</sup></u>

REMARKS:  
Oakley Circulants, Mix Cement  
Displace Cement  
Cement Drill Circulants  
Thank You  
Play Henry Kevin

SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	<u>1512<sup>00</sup></u>
EXTRA FOOTAGE	⑧
MILEAGE <u>22 miles</u>	⑨ <u>22</u>
MANIFOLD <u>1/2" 24"</u>	⑩ <u>275<sup>00</sup></u>
<u>Littlefield</u> <u>12 miles</u>	⑪ <u>94</u>
	⑫

CHARGE TO: Cholla

TREET \_\_\_\_\_

ITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 2658<sup>45</sup>

PLUG & FLOAT EQUIPMENT

	⑬	
	⑭	
	⑮	
	⑯	
	⑰	

I, Jim Mondino, of Allied Oil & Gas Services, LLC, do hereby request 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 one 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)	<u>255.29</u>
TOTAL CHARGES	<u>8,182.15</u>
DISCOUNT	<u>1,718.25</u>
	<u>6,463.89 Net</u>

IF PAID IN 30 DAYS

PRINTED NAME \_\_\_\_\_

SIGNATURE Jim Mondino



# ALLIED OIL & GAS SERVICES, LLC

060177

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:

Oakley

DATE 3-2-13	SEC. 1	TWP. 2	RANGE 30	CALLED OUT	ON LOCATION	JOB START 13:00	JOB FINISH
LEASE Andersson Farms	WELL # 1-1	LOCATION Oberlin SW-5N-14W			COUNTY DeCATUR	STATE KS	
OLD OR <u>NEW</u> (Circle one)			New Wells				

CONTRACTOR WW-6	OWNER Same
TYPE OF JOB PTA	
HOLE SIZE 7 7/8	T.D. 2349
CASING SIZE	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE 4 1/2	DEPTH 2349
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

CEMENT	
AMOUNT ORDERED	205 SKS 6 1/4 4 1/2 Gal
	1/4" Flo Seal

COMMON	125 SKS	@ \$17.80	\$2237.50
POZMIX	80 SKS	@ \$4.35	\$348.00
GEL	7 SKS	@ \$23.42	\$163.94
CHLORIDE		@	
ASC		@	
Flo Seal	51 "	@ \$2.92	\$151.92
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	220.16 CF x	@ \$2.48	\$546.00
MILEAGE	9.21 x 72 x	@ \$2.60	\$1724.11
TOTAL			\$5570.88

**EQUIPMENT**

PUMP TRUCK # 422	CEMENTER Darrin Racette
	HELPER Tyler Flipse
BULK TRUCK # 396-326	DRIVER David Scarpino
BULK TRUCK #	DRIVER

**REMARKS:**

Mix 25 SKS Cement 2549'  
 Mix 170 SKS Cement 1860'  
 Mix 40 SKS Cement 323'  
 Mix 10 SKS Cement 40'  
 Plug Rathole 30 SKS Cement

**SERVICE**

DEPTH OF JOB	2349
PUMP TRUCK CHARGE	\$7482.20
EXTRA FOOTAGE	@
MILEAGE 72	@ \$7.72 \$554.40
MANIFOLD	@
LV mileage	@ \$4.12 \$316.80
TOTAL \$3354.79	

CHARGE TO: Cholla Productions  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

1 Wooden Plug	@	\$107.64
	@	
	@	
	@	
	@	

To: Allied Oil & Gas Services, LLC.  
 You are hereby requested to rent cementing equipment and furnish cement and labor to plug cementer



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

March 19, 2013

Emily Hundley-Goff  
Cholla Production, LLC  
10390 BRADFORD RD.  
SUITE 201  
LITTLETON, CO 80127

Re: ACO1  
API 15-039-21166-00-00  
ANDERSON FARMS 1-1  
NW/4 Sec.01-02S-30W  
Decatur 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,  
Emily Hundley-Goff