

Co	nfiden	tiality	/ Requested:
	Yes	N	lo

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1126337

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 #	API No. 15 -
Name:	Spot Description:
Address 1:	SecTwpS. R 🔲 East 🗌 West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
□ Oil □ WSW □ 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: □ Well Name:	Producing Formation: Elevation: Ground: Kelly Bushing: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: sx cmt.
Original Comp. Date: Original Total Depth:	
□ Deepening □ Re-perf. □ Conv. to ENHR □ Conv. to SWD □ Plug Back □ Conv. to GSW □ Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
□ Commingled Permit #:	Chloride content:ppm Fluid volume:bbls Dewatering method used: Location of fluid disposal if hauled offsite:
☐ ENHR Permit #: ☐ GSW Permit #:	Operator Name: Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	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 III Approved by: Date:

Page Two

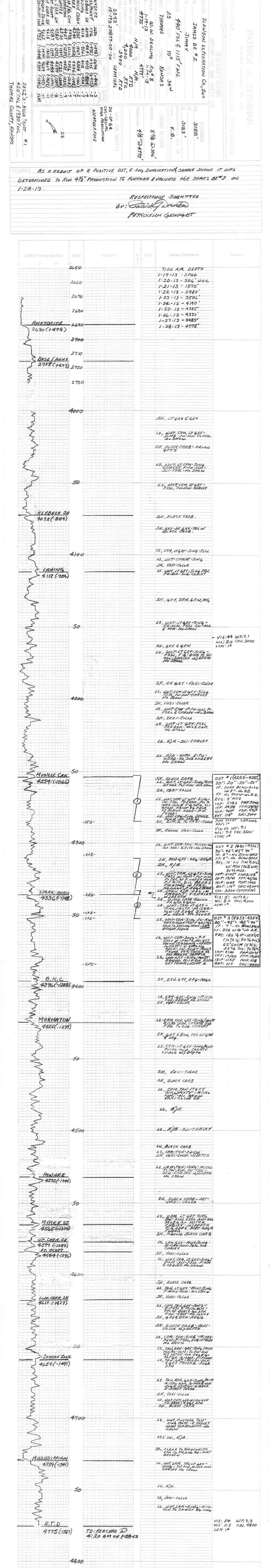


Operator Name:				_ Lease l	Name: _			Well #:		
Sec Twp	S. R	East \	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	tic pressures, bot d.	tom hole temp	erature, flui	d recovery,
Final Radioactivity Lo- files must be submitte						ogs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log
Drill Stem Tests Taker (Attach Additional S		Yes	☐ No		_		on (Top), Depth ar			mple
Samples Sent to Geo	logical Survey	Yes	No		Nam	е		Тор	Da	tum
Cores Taken Electric Log Run		Yes Yes	☐ No ☐ No							
List All E. Logs Run:										
			CASING		☐ Ne					
		1				ermediate, product		T	_	
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		d Percent itives
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used		Type and P	ercent Additives		
Perforate Protect Casing	100 20111111									
Plug Back TD Plug Off Zone										
1 lug 0 li 20110										
Did you perform a hydrau	ulic fracturing treatment	on this well?				Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to								p question 3)		
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemical c	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1)
Shots Per Foot		ION RECORD - I					cture, Shot, Cement		d	Depth
						,		,		
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or Ef		ducing Meth Flowing	od:	g 🗌	Gas Lift (Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls. 0	as-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		N/	1ETHOD OF	COMPLE	TION:		PRODUCTION)N INTER\/^	1.
Vented Sold		Open I	_	Perf.	Dually	Comp. Cor	mmingled	THODOCTIC	ZIN IIN I ERVA	L.
	bmit ACO-18.)	Other	(Specific)		(Submit)		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Slawson Exploration Company, Inc.
Well Name	James BE 2
Doc ID	1126337

Tops

Name	Тор	Datum
Anh	2690	+498
B/Anh	2716	+472
Wabaunsee	3728	-540
Hbn	4072	-884
Lns	4114	-926
Muncie Creek	4255	-1067
Stk	4340	-1152
BKC	4389	-1210
Marmaton	4427	-1239
Pawnee	4535	-1347
Myrick Station	4567	-1379
Uck	4580	-1392
Ft Scott	4587	-1399
Lck	4618	-1430
John Z	4662	-1474
Msp	4732	-1544



ALLIED OIL & GAS SERVICES, LLC. 058868 Federal Tex.ID.# 20-5076004

SOUTHLAKE, TEXAS 760	192:		SERV	Darl	y Rs	
DATE /- 19-13 SEC 25 TWO	RANGE 3	CALLED OUT	ON LOCATION	JOBSTART SO PRY	SI TOPLE	•
LEASE JAMES BE WELL 2	LOCATION COM	comest-2	4.50 20	COUNTY	STATE	t. t
OLD OR NEW (Circle one)	15 Y	E Sierto		24		1.2
CONTRACTOR WW 48		OVER 3	aug.	101		I.a.
TYPEOFIOR Ser face		_				
HOLESIZE / T.D.	3267 111. 5867	CEMENT	ADERED 215	-6	2800	
CASING SIZE STATE DEP		_ AMDUNTO	RDERED KIN	372.60	_ مردس	:
DRILL PICE DEP			72/	· · · · · ·		
TOOL DEP	TH			40.00		4
	MUMI	_ COMMON_	215545	@ <u>(2-70</u>	3848,50	: }
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DISPLACEMENT /8-63	·	ASC		ଜ		1
EQUIPMENT				_@		
PUMPTRUCK CEMENTER LOL	2	<i>⊾!</i>		-0	. ———	
PUMPTRUCK CEMENTER ZOK	Beower	- 2		@		
BULKTRUCK				_@	,~	
1347 DRIVER Broud	on Wilken	<u> </u>		_@	.——	
BULKTRUCK				@		
# DRIVER		- HANDLING	232,4281	50 2H8	526:58	551.72
REMARKS:		MILEAGE 2	O, Gloon X 20			ייייות ביב
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					<u>,</u>	•
				_@		•
To: Allied Oil & Gas Services, LLC.				_@		•
You are hereby requested to rent cent and furnish comenter and helper(s) to					-, 	•
contractor to do work as is listed. The		s.				
done to satisfaction and supervision			<i></i>	TOTAL		
contractor. I have read and understa		L CATECTAY	(IF Amy) 32.	5.14		
TERMS AND CONDITIONS" lister	I on the reverse sid	ic. and in	76	11,65	;	
A M	What Island	TOTAL CHA	11 00 1			. -
PRINTED NAME	ALUSCHI	DISCOUNT	1074	Z I IFPA	ID IN 30 DAYS	i:
_ \	$H \mathcal{L}$		5430	1.0%		
SIGNATURE	OV `			- Soute	9.	
0410	*					

060037 ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8851475

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

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SHRVICH HUNNIN	ELEDOUT ONLOCATION TOP STARTAN TOP THISTER PARTY STATE COUNTY STATE TO COUNTY STATE TO COUNTY STATE TO THE SAME ONNER SAME	CEMENT AMOUNT ORDERED 650 SKs #12cm /4, Fresal	POZMIX GBI, GBI, CHLORIDB CHLORIDB ASC ASC ALC ACC ASC ACC ACC ACC	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	DBPTH OF JOB <i>2726/</i> PUMPTRUCK CHARGB
OX 93999 HLAKE, TEXAS 760	DATE 34. 13 SEC. 3 TWP. RANGE 34 CALLED OUT ON LOCATION CALLED OUT ON LOCATION MONUMENT 21 SN-20 OLD OR NEW CIRCLE ONE) 15-1/2 - Nints CONTRACTOR LUC - 8 TOP STACE OWNER Same	4775 U. 4773 S. 8% DBFTH DBFTH DBFTH ALMINUM CHORD LOWER	IN CSG. IT 42.79 66c EQUIPMENT CEMBRITED DECEM ROOPS	Lavid Searland Standand Standan (1) (Kisson Inkis)	HARGETO: SQUSSON OIL

o: Allied Oil & Gas Services, LLC.

one to satisfaction and supervision of owner agent or ontractor. I have read and understand the "GENERAL TRIMS AND CONDITIONS" listed on the reverse side. onfractor to do work as is listed. The above work was ou are hereby requested to rent cementing equipment nd furnish cementer and helper(s) to assist owner or

Gchzales AINTED NAME_ ONATURE

- IF PAID IN 30 DAYS TOTAL 6,655.9 792.16 1332456 3381.13 ၜၜၜၜ SALES TAX (If Any)_ TOTAL CHARGES. DISCOUNT

TOTAL 2406 25

PLUG & FLOAT BOUIPMENT

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TREET

060036 ALLIED OIL & GAS SERVICES, LLC

SERVICE POINT:

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1-39-13 SEC. TYVE, RANGE, O	CALLED OUT ON LOCATION IN	JOB START A. JOB PINISH
0/ 0/		7/30 "" 10.30 Am
LEASE MES DE WELL# 2 LOCATION MANUMENT	200-5N-2W	Mamos Ks.
OLD ORAELE (Circle one) 1S - ドレ B - 人いか		6
ह जाज ह	OWNER Same.	
7 paduction a Stage	CEMENT	
CASING SIZE 4 Z2. DEPTH 4/773.86 TUBING SIZE DEPTH	AMOUNT ORDERED 210 SKS	s Asa, 10% Salt
DRILL PIPE DEPTH 272.1"	Super Flush	
	7	e
FLIN CSQ. 21.00	GBL	9 9
PERFS, DISPLACEMENT 73:166 bb2	210 5/3	\$ 68 EU # 103 FG
P	G. 18011 12 1050 #	
TRUCK)
143) HELPER Hall Braver St. Tyler Flipse N		
373-808 DRIVER David Sparians	Dapurtlush 1266L	128.28 4 704.46
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	PLUG & FLOAT EQUIPMENT	EQUIPMENT
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To: Allied Oil & Gas Services, LLC.		8,70
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IF PAID IN 30 DAYS

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25/2

5/10-2

haugo.

RINTED NAME

IGNATURE

559.95

48.8H

SALES TAX (If Any). TOTAL CHARGES. DISCOUNT

ione to satisfaction and supervision of owner agent or contractor, I have read and understand the "GBNBRAL IBRMS AND CONDITIONS" listed on the reverse side.

You are hereby requested to rent cennenting equipment and furnish cementer and helper(s) to assist owner or sontractor to do work as its listed. The above work was

TOTAL 6882

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/

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

April 25, 2013

Steve Slawson Slawson Exploration Company, Inc. 204 N ROBINSON AVE STE 2300 OKLAHOMA CITY, OK 73102-6891

Re: ACO1 API 15-193-20877-00-00 James BE 2 SW/4 Sec.23-10S-34W Thomas 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, Steve Slawson