

Kansas Corporation Commission Oil & Gas Conservation Division

1131740

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
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 #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
☐ Oil ☐ WSW ☐ SHOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW ☐ OG ☐ GSW ☐ Temp. Abd. ☐ CM (Coal Bed Methane) ☐ CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?
Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to: w/ sx cmt.
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 Conv. to GSW Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #: SWD Permit #: ENHR Permit #: GSW Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name: License #: Quarter Sec Twp S. R
Spud Date or Date Reached TD Completion Date or 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 III Approved by: Date:								

Side Two

1131740

Operator Name:			Lease Name: _			_ Well #:	
Sec Twp	S. R	East West	County:				
time tool open and clorecovery, and flow rat	osed, flowing and shu	d base of formations pe t-in pressures, whether st, along with final chart well site report.	shut-in pressure rea	ched static level,	hydrostatic pres	sures, bottom h	ole temperature, fluid
Drill Stem Tests Taken Yes No (Attach Additional Sheets)				og Formation	n (Top), Depth ar	nd Datum	☐ Sample
Samples Sent to Geological Survey			Nam	Name		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Cop)	ed Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
			RECORD No	ew Used ermediate, production	on, 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
		ADDITIONA	L CEMENTING / SQI	JEEZE RECORD			
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	ct Casing Back TD		# Sacks Used		Type and I	Percent Additives	
Shots Per Foot	PERFORATI Specify			cture, Shot, Cemen count and Kind of Ma		d Depth	
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	HR. Producing Me		Gas Lift O	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wat	ter Bb	ols.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:		METHOD OF COMPL	ETION:		PRODUCTIO	ON INTERVAL:
Vented Solo	d Used on Lease	Open Hole	Perf. Duall		nmingled nit ACO-4)		
(If vented, Su	bmit ACO-18.)	Othor (Specify)	(Submit	AUU-U) (SUDI	IIII ACO-4)		

ALLIED OIL & GAS SERVICES, LLC 054162 Federal Tax 1.D.# 20-5975804

REMIT TO P.O. B		NSAS 6766	55			SERV	ICE POINT:	rel
DATE 3-5-/3	SEC.	TWP.	RANGE	CAL	LED OUT	ON LOCATION	JOB START	IOB FINISH
LEASE RULMEN	WELL#	1	LOCATION 2	Paleo.	K		COUNTY	STATE
OLD OR NEW (Cit			2 South	ahr .		West sow		-1
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CONTRACTOR			n Eegle,		OWNER			
TYPE OF JOB		Stage	15 3929	<u></u>				
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TOOL			PTH		-475 AL	1 110-3	seey 35si	- tor My pau
PRES. MAX	**************************************	****	NIMUM		COMMON		@	*
MEAS. LINE		SHO	TAIOL BC		POZMIX Z	16456	@735	\$=
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PERFS.			01 Ac	/ ,	ÇHLORIDE_			
DISPLACEMENT		5/2ge = 1		12 = 42	45C-135	*	_@	\$2.821.5 o
	EQ	UIPMENT	Ph. B.	01	1LW- 7		_@ <u>20.9</u>	\$ 7.837.50
			Clann G	1306	11/10/	~/>SS	_@ <i>U.5</i> _ @	1,837. D
	CEMEN	TER /	ny P-		Calsonite .	14 700) @ , 7 8	18686-50
	HELPER	der	in K.		F10-201	- 48 120	Do 2.97	\$356.40
BULKTRUCK		35.4					@	
	DRIVER	1,111	2 Yng		Much Flus	3-20	@ <u>59.2</u> 0	B1174.00
BULKTRUCK # 1773	DRIVER	Dage	>				_ @ 	**************************************
# 1/83	DRIVER	14 100	901, 2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		99.60 #15	_@ <i>Z,Y</i> 8_	\$1,735.01
		-			MILEAGE 乙	22.62 62	2.60	<u> 823,477,37</u>
		emarks:	,	1			TOTA	L#18,087.80
* Circulate	anu	ald =10	821/9Ce	<u>. '. </u>				
Dronge	1 pa	<u> </u>		105		SERV	ICE	•
X 12 3 118	~ Pu	me-	commy 6) <u>1</u> 35%		10	. 29	33.04
DS - 1	× >	-	1) Isvitos	(-6 ma.o	DEPTH OF IC			*2,558.75
* Circulab		<u> </u>	50 LhC	droneel			@	10 2/300-10
V. Calgran	<u> </u>		711 T.W.		MILBAGE /			\$ 346,50
Kigning X	-CO1445		1715 EVI.	7 7 07 A4.	MANIFOLD	Lobe Hen	@_ <i>4.4</i> c	
DE- 425		بردسلط	growns a	to south	30			
- apprx. 5051		sto ps	Very	1.	2 1 S	450.		\$ 2,406 15
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STREET		<u>.</u>						• .
CITY		STATE	ZIP_			PLUG & FLO	AT EQUIPM	ENT
4								
!					1X LATUS	- DOWN 5/2	@	\$ 32409
					1x DV-700	12 5/2	@ <i>_</i>	
To: Allied Oil &	& Gas Se	rvices, LL	C.		(plicer Ex	@_ <u>573</u>	3 1 687.96
You are hereby	requeste:	d to rent co	ementing caui	oment	1 X Float	Shoe Bro	<u>@</u> _₩	9715.02
and furnish cen	renier an	d helper(s)	to assist own	er or			@	
contractor to do	work as	is listed.	The above wo	rk was				AL 682233
done to satisfac	tion and	supervisio	n of owner ag	ent or			101	AL Ja VO COL
contractor. I ha	ive read a	and unders	tand the "GEN	IERAL	SALES TAX	ashun 14	487.17	
TERMS AND	CONDIT	'IONS" list	ted on the reve	rse side.		H 20	1112 (2	
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SIGNATURE _	4m	my C	- y grove		000	D	yes	J2/249.53
		•	•			•		

ALLIED OIL & GAS SERVICES, LLC 054160 Federal Tax 1.D.# 20-5975804

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665						SERVICE POINT:				
DATE 8-2-13	SEC.	TWP.	RANGE	,	CALLED OUT	ON LOCATION	JOB START	JOB FINISH		
LEASE		1		Q. p	po 65		COUNTY	STATE		
OLD OR NEW (Cir	WELL#	<u> </u>				("	Charm	1 7 5		
CONTRACTOR		norice	10 50 0	<u> </u>	0WNER	W > 4	<u> </u>	÷		
TYPE OF JOB		JA Ca.			OWNER		V 7/16/4			
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DRILL PIPE			PTH		fracet.		The second			
TOOL		DE	PTH							
PRES. MAX			NIMUM			<u>~70<+-</u>	<u> </u>	2 B3,043.0		
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DISPLACEMENT		13.77	200		ASC			2 2 3 3 3 4 6 6 6 6 6		
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**** · · · · · · · · · · · · · · · · ·	HELPER	Kam	A River			817 -	@			
BULK TRUCK	DRIVER	town				***************************************	@			
BULK TRUCK	DRIVER	N. C. S. C.	6.				@			
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CHARGE TO:		A Same	7	77.	- î. -		TOTA	L#2 036.1		
CITY	S	ГАТЕ	ZIP			PLUG & FLOA	AT EQUIPMI	ENT		
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•			4	$-\lambda_{i}$:	@			
				1,1			@			
To: Allied Oil &		-	j .		***************************************		@ @			
You are hereby r	•				***************************************	· ·	@	4		
and furnish ceme contractor to do done to satisfact	work as i	s listed.	The above work	was			ТОТА	AL		
contractor. I have		-			* *					
TERMS AND C	ONDITIO	ONS" list	ed on the revers	e sid	SALES TAX (If Any)	com he	2		
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SIGNATURE		4 1	get a partie .							