



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1131189
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: _____



1131189

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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ALLIED

OIL & GAS SERVICES, LLC

PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 135263

Invoice Date: Mar 15, 2013

Page: 1

Chaco Energy Company
P O Box 1587
Denver, CO 80201

Now Includes:



Customer ID	Field/Project	Payment Terms	
Chaco	60139	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Oakley	Mar 15, 2013	4/14/13

Quantity	Item	Description	Unit Price	Amount
132.00	MAT	Smith #1-28		
		Class A Common	17.90	2,362.80
88.00	MAT	Pozmix	9.35	822.80
8.00	MAT	Gel	23.40	187.20
55.00	MAT	Flo Seal	2.97	163.35
236.26	SER	Cubic Feet	2.48	585.94
147.98	SER	Ton Mileage	2.60	384.77
1.00	SER	Plug to Abandon	2,483.59	2,483.59
15.00	SER	Pump truck Mileage	7.70	115.50
15.00	SER	Light Vehicle Mileage	4.40	66.00
1.00	EQP	8.5/8 Wooden Plug	107.64	107.64
1.00	CEMENTER	Alan Ryan		
1.00	EQUIP OPER	Wayne McGhghy		
1.00	OPER ASSIST	Darrin Hoeb		

Alan Schubert
MAR 28 2013

TAX 5095.71
397.47
5493.18 ← PAY

Subtotal	7,279.59
Sales Tax	567.81
Total Invoice Amount	7,847.40
Payment/Credit Applied	
TOTAL	

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

ONLY IF PAID ON OR BEFORE

SCANNED

ALLIED

OIL & GAS SERVICES, LLC

INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 135108

Invoice Date: Mar 5, 2013

Page: 1

Voice: (817) 546-7282
Fax: (817) 246-3361

3/19/13

Chaco Energy Company P O Box 1587 Denver, CO 80201
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Customer ID	Field/Traker #	Payment Terms	
Chaco	60120	Net 30 Days	
Host Location	Camp Location	Service Date	Due Date
KS1-01	Oakley	Mar 5, 2013	4/4/13

Quantity	Item	Description	Unit Price	Amount
145.00	MAT	Smith #1-28		
		Class A Common	17.90	2,595.50
3.00	MAT	Gel	23.40	70.20
5.00	MAT	Chloride	64.00	320.00
157.10	SER	Cubic Feet	2.48	389.61
99.00	SER	Ton Mileage	2.60	257.40
1.00	SER	Surface	1,512.25	1,512.25
15.00	SER	Pump Truck Mileage	7.70	115.50
15.00	SER	Light Vehicle Mileage	4.40	66.00
1.00	CEMENTER	Andrew Forslund		
1.00	EQUIP OPER	Dane Retzlloff		
1.00	OPER ASSIST	Kevin Ryan		

SEE [Handwritten Signature]

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF [Redacted]

ONLY IF PAID ON OR BEFORE [Redacted]

Subtotal	5,326.46
Sales Tax	237.88
Total Invoice Amount	5,564.34
Payment/Credit Applied	
TOTAL	5,564.34

MAR 22 2013



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Chaco Energy Co.
455 Sherman St. STE 520
Denver, CO 80203
ATTN: Austin Garner

28-13-32-Logan KS
Smith #1-28
Job Ticket: 49110 **DST#: 1**
Test Start: 2013.03.11 @ 23:25:10

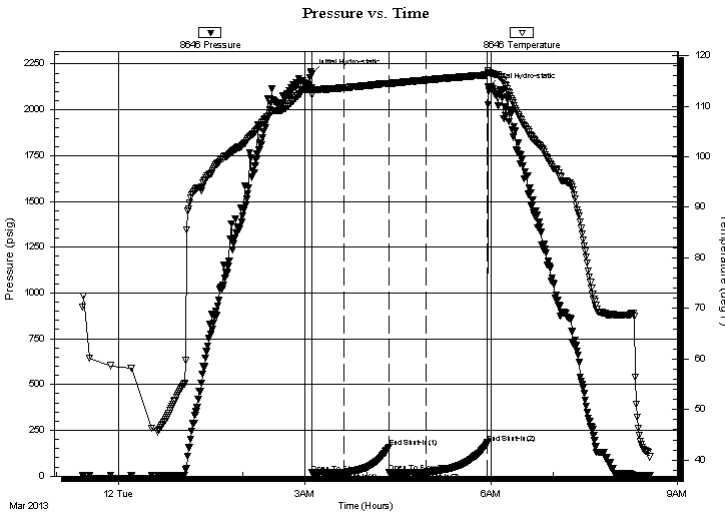
GENERAL INFORMATION:

Formation: **Pawnee**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 03:06:40
Time Test Ended: 08:33:40
Interval: **4469.00 ft (KB) To 4504.00 ft (KB) (TVD)**
Total Depth: 4504.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Good
Test Type: Conventional Bottom Hole (Initial)
Tester: Tate Lang
Unit No: 65
Reference Elevations: 3039.00 ft (KB)
ft (CF)
KB to GR/CF: ft

Serial #: 8646 Inside
Press @ Run Depth: 21.68 psig @ 4470.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2013.03.11 End Date: 2013.03.12 Last Calib.: 2013.03.12
Start Time: 23:25:25 End Time: 08:33:40 Time On Btm: 2013.03.12 @ 03:06:25
Time Off Btm: 2013.03.12 @ 05:57:25

TEST COMMENT: IF-Weak surface blow
IS-Dead no return
FF-Dead no blow
FS-Dead no return

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2195.47	113.63	Initial Hydro-static
1	18.39	112.19	Open To Flow (1)
32	20.33	113.65	Shut-In(1)
75	159.43	114.53	End Shut-In(1)
75	20.92	114.50	Open To Flow (2)
111	21.68	115.17	Shut-In(2)
170	181.53	116.21	End Shut-In(2)
171	2123.20	116.62	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1.00	100%M	0.00

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Chaco Energy Co.

28-13-32-Logan KS

455 Sherman St. STE 520
Denver, CO 80203

Smith #1-28

Job Ticket: 49110

DST#: 1

ATTN: Austin Garner

Test Start: 2013.03.11 @ 23:25:10

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: 47.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
1.00	100%M	0.005

Total Length: 1.00 ft Total Volume: 0.005 bbl

Num Fluid Samples: 0

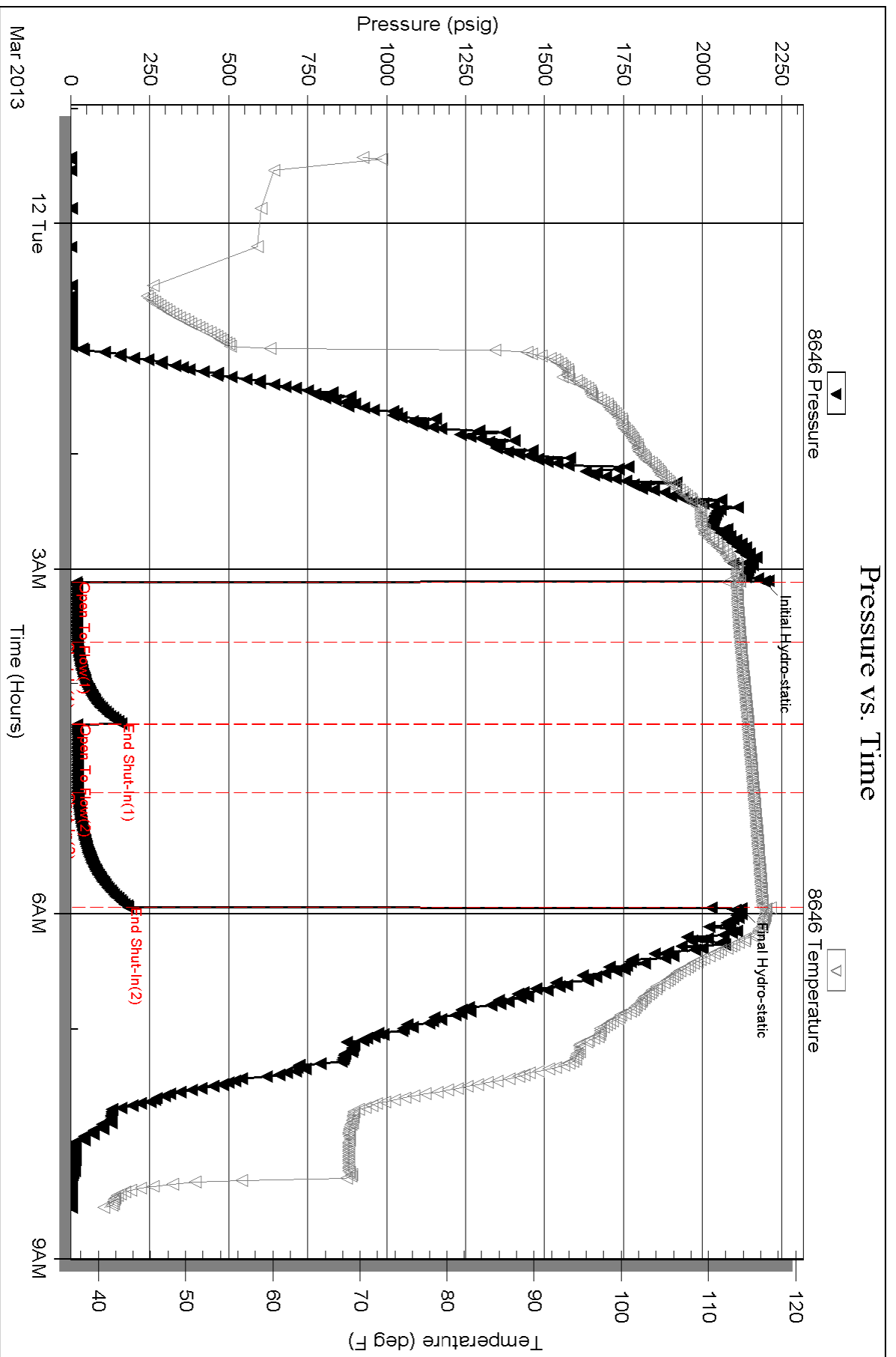
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Chaco Energy Co.
455 Sherman St. STE 520
Denver, CO 80203
ATTN: Austin Garner

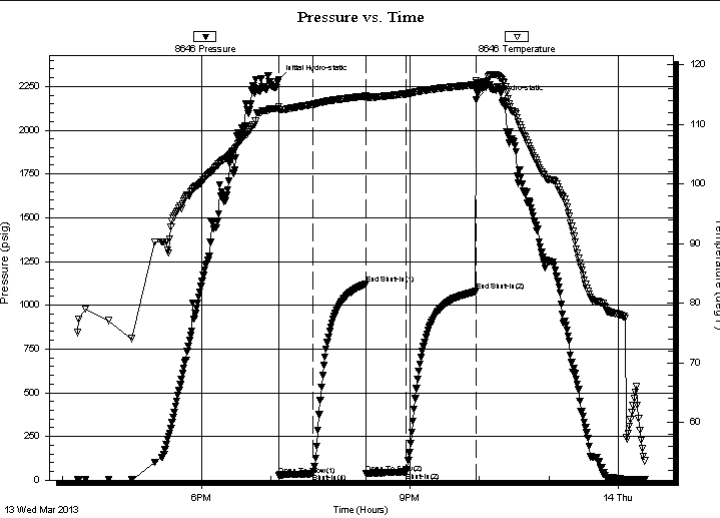
28-13-32-Logan KS
Smith #1-28
Job Ticket: 49111 **DST#: 2**
Test Start: 2013.03.13 @ 16:12:43

GENERAL INFORMATION:

Formation: **Johnson**
Deviated: No Whipstock: ft (KB) Test Type: Conventional Bottom Hole (Reset)
Time Tool Opened: 19:06:58 Tester: Tate Lang
Time Test Ended: 00:22:43 Unit No: 65
Interval: 4634.00 ft (KB) To 4680.00 ft (KB) (TVD) Reference Elevations: 3039.00 ft (KB)
Total Depth: 4680.00 ft (KB) (TVD) ft (CF)
Hole Diameter: 7.88 inches Hole Condition: Good KB to GR/CF: ft

Serial #: 8646 Outside
Press @ Run Depth: 46.26 psig @ 4639.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2013.03.13 End Date: 2013.03.14 Last Calib.: 2013.03.14
Start Time: 16:12:58 End Time: 00:22:43 Time On Btm: 2013.03.13 @ 19:06:28
Time Off Btm: 2013.03.13 @ 21:56:58

TEST COMMENT: IF-Weak surface blow built to 3/4 in.
ISI-Dead no return blow .
FF-Dead no blow
FSI-Dead no return blow



PRESSURE SUMMARY			
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2289.35	112.98	Initial Hydro-static
1	29.08	112.43	Open To Flow (1)
30	36.96	113.30	Shut-In(1)
75	1119.77	114.70	End Shut-In(1)
76	38.77	114.20	Open To Flow (2)
110	46.26	115.08	Shut-In(2)
171	1078.69	116.62	End Shut-In(2)
171	2172.24	117.32	Final Hydro-static

Recovery		
Length (ft)	Description	Volume (bbl)
5.00	100%M	0.02

* Recovery from multiple tests

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Chaco Energy Co.

28-13-32-Logan KS

455 Sherman St. STE 520
Denver, CO 80203

Smith #1-28

Job Ticket: 49111

DST#: 2

ATTN: Austin Garner

Test Start: 2013.03.13 @ 16:12:43

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: 58.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	100%M	0.025

Total Length: 5.00 ft Total Volume: 0.025 bbl

Num Fluid Samples: 0

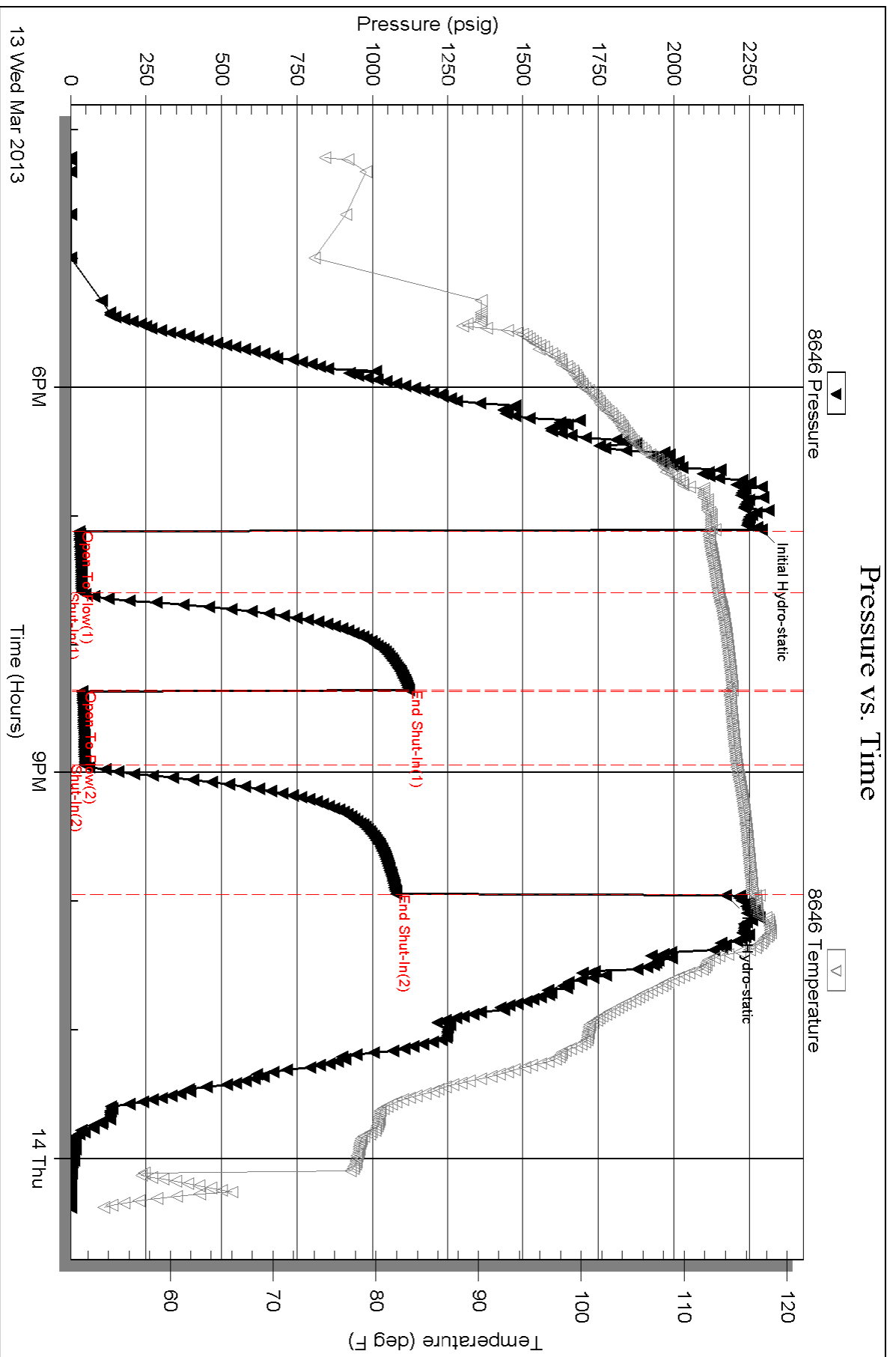
Num Gas Bombs: 0

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

April 04, 2013

Alan Nelson
Chaco Energy Company
PO BOX 1587
DENVER, CO 80201-1587

Re: ACO1
API 15-109-21163-00-00
Smith 1-28
NE/4 Sec.28-13S-32W
Logan 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,
Alan Nelson

Form	ACO1 - Well Completion
Operator	Chaco Energy Company
Well Name	Smith #1-28
Doc ID	1131189

Tops		
Name	Top	Datum
Anhydrite	2509	530
Heebner Sh.	3994	-955
Lansing	4038	-999
Stark Sh.	4275	-1236
Marmaton	4282	-1343
Ft. Scott	4537	-1498
Chr. Sh.	4564	-1525
Johnson	4606	-1567
Sand	4662	-1623
Miss	4685	-1646

Logs Run

DUAL INDUCTION ,GR, SP 250'-T.D
COMP. DENSITY/ NEUTRON, GR, CAL. 3700'- T.D.
LITHO - DENSITY, PE 3700'-T.D.
SONIC, GR. 250'- T.D