



**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
- Conv. to GSW
- Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date      Date Reached TD      Completion Date or 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

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total 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**

- Letter of Confidentiality Received  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_



1138276

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. 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 <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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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
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<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 (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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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

May 07, 2013

Winnie Scott  
Tug Hill Operating, LLC  
550 BAILEY AVE, STE 510  
FT. WORTH, TX 76107

Re: ACO1  
API 15-083-21836-01-00  
Hahn Inc 1-15H  
NE/4 Sec.15-22S-23W  
Hodgeman 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,  
Winnie Scott



# INVOICE

DATE	INVOICE #
10/15/2012	3502

<b>BILL TO</b>
TUG HILL OPERATING 550 BAILEY AVE, SUITE 510 FORT WORTH, TX 76107

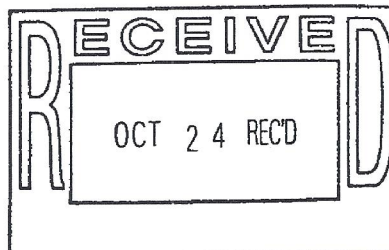
<b>REMIT TO</b>
EDGE SERVICES, INC. PO BOX 14201 OKLAHOMA CITY, OK 73113

COUNTY	STARTING D...	WORK ORDER	RIG NUMBER	LEASE NAME	Terms
HODGEMAN, ...	10/15/2012	2846	PATTERSON #172	HAHN 1-15 H	Due on rec...

**Description**

DRILLED 100' OF 30" CONDUCTOR HOLE  
 DRILLED 8' OF 76" HOLE  
 FURNISHED AND SET 8' X 6' TINHORN CELLAR  
 FURNISHED 100' OF 20" CONDUCTOR PIPE  
 DRILLED MOUSE HOLE  
 FURNISHED 73' OF 16" CONDUCTOR PIPE

TOTAL BID \$20,000.00



Well Name Hahn 1-15H  
 AFE No. 12-0160  
 ACCNT No. 840.05  
 Name Chase Bender  
 Signature [Handwritten Signature]

Sales Tax (7.45%)	\$383.46
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Thank you for your business.

**TOTAL** \$20,383.46

Well Starting:

Well Ending:

[View Report](#)

Report Date Starting:

Report Date Ending:

AFEList:



# Daily Drilling Report

5/7/2013 12:48 PM

## Well Information

Well Hahns Inc 1-15H	Country USA	State KS	County Hodgeman	Field Unknown	Report Date 10/16/2012	Lease 226 FNL 660 FEL
API / IPO UWI Hodgeman	Qtr/Qtr, Block, Sec, Town, Range .15,22S,23W	AFE Number 12-0160	Orig KB Elev (ft)	Ground Elevation (ft) 2344.0	KB-GRD (ft) -2344.0	Spud Date 2/18/2013
						Rig Release Date 3/6/2013

## Daily Operations

24 Hour Summary  
Drilled and cemented conductor; Used 225 sacks of cement.

24 Hr Forecast  
Drill and cement mouse hole.

Operations At Report Time  
Reporting.

Daily Total (Cost) \$55,944.00	Cum Daily Total (cost) \$108,562.00	Total AFE (Cost) \$0.00	Hole Condition
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## Daily Contacts

Wellsite Supervisor Chase Bender	Supervisor Phone 501-733-3139
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## Time Log

## Mud Checks

Type	Depth (ftKB)	Source	Density (lb/gal)	Funnel Viscosity (s/qt)	Filtrate (mL/30min)		
HTHP Filtrate (ml/30min)	Mud Lost Hole (bbl)	Mud Lost (Surf) (bbl)	PV(cp)	YP (lb/100ft²)	pH		
Vis 6rpm	Lime (lb/bbl)	Gel 30 min (lb/100ft²)	Gel 30 min (lb/100ft²)	Gel 10 sec (lb/100ft²)	Gel 10 min (lb/100ft²)		
Calcium (mg/L)	Ca CL (wt%)	Solids (%)	LGS (%)	Sand (%)	Percent Oil (%)		
					Oil Water Ratio	Electric Stab (V)	MBT (lb/bbl)

## Bit Record

## BHA

## Drilling Parameters

Start Depth (ftKB)	End Depth (ftKB)	Cum Depth Drilled (ft) 0	Total ROP (ft/hr) #Error	Drilling Torque
Motor RPM (rpm)	RPM (rpm)	QGas Inj (ft³/min)	Drilling Time (hr) 0.00	Rotating Time (hr)
Cum Drilling Time (hr) 0.00	SPP (psi)	FlowRate (gpm) 0.00	TFA (incl Noz) (in²)	Weight on Bit (lbf)
				String Wt (lbf)

## Pump Operations

## Hydraulic Data

## Survey Data

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2078  
Wichita, KS 67202-3802



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Mark Sievers, Chairman  
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Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

May 09, 2013

Winnie Scott  
Tug Hill Operating, LLC  
550 BAILEY AVE, STE 510  
FT. WORTH, TX 76107

Re: ACO-1  
API 15-083-21836-01-00  
Hahn Inc 1-15H  
NE/4 Sec.15-22S-23W  
Hodgeman County, Kansas

Dear Winnie Scott:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 10/16/2012 and the ACO-1 was received on May 07, 2013 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department