



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1139586
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: _____



1139586

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: 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

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	H & C Oil Operating Inc.
Well Name	L.D.N. 19-1
Doc ID	1139586

Tops

Name	Top	Datum
Top Anhydrite	1885	+629
Base Anhydrite	1918	+596
Heebner	3798	-1284
Lansing	3837	-1323
Stark	4096	-1582
BKC	4162	-1648
Marmaton	4190	-1676
Fort Scott	4357	-1843

Marc Downing
 Consulting Petroleum Geologist
 1411 Washington Circle
 Hays, KS 67601
 Phone: 620-428-1356 (cell) 785-621-2286

GEOLOGIC REPORT LOG

COMPANY	H&C Oil Operating, Inc.	PRODUCTION	O+A
WELL	LDN #19-1	FIELD	Wildcat
LOCATION	900' S&L + 1820' Fair	ELEVATION	KB 2514
SEC.	19	TWP.	17S
COUNTY	Miss	DF	2505
STATE	Kansas	GL	2505
OPERATOR	H&C Oil Operating, Inc.	Drilling Measured from:	KB
CONTRACTOR	H2 Rig #3	Drilling Time from	3450 to 3650
COMM.	5-3-13	Sample Examined from	3650 to 3700
		Geological Supervision from	3650 to 3700
		Wellsite Geologist	Marc Downing
		Wellsite Surveyor	Name
		SURF:	888 @ 279
		PROD:	Name
		TOTAL DEPTH LOG:	4384

FORMATION	SAMPLE	ELECTRICAL LOG TOP	SUB-SEA DRUM POSITION	STRUCTURAL POSITION
The Anhydrite Base Anhydrite	1885	1885	1885	12
Hearder	3798	3798	3798	10
Kansans	3837	3837	3837	10
Rock	4004	4004	4004	10
Marcus	4190	4190	4190	11
Fort Scott	4357	4357	4357	11
Cherokee Sh.	4557	4557	4557	11

REFERENCE WELL FOR STRUCTURE H&C Oil Operating, Inc. Sec. 19-17S-26W
 Oimages #19-1 1588 S&L + 900' Fair

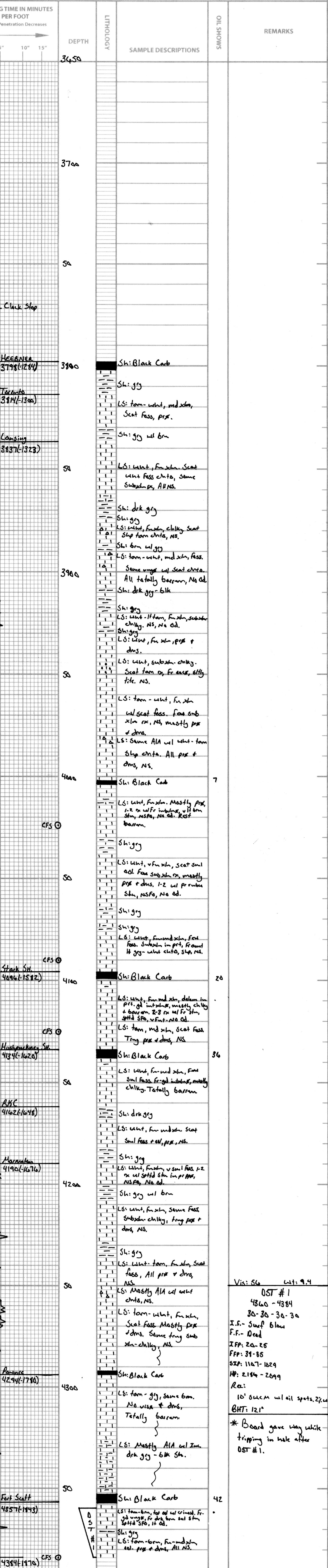
DRILL STEM TESTS

No.	Interval	IFP Time	ISIP Time	FFP Time	ESIP Time	HP-HP	RECOVER

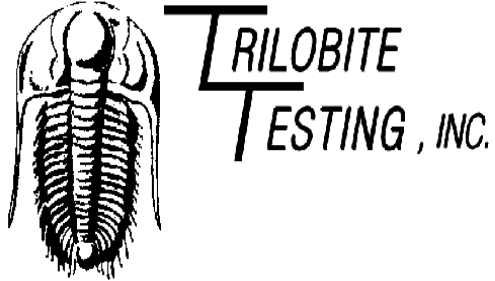
REMARKS AND RECOMMENDATIONS: Unbit tripping in hole after DST #1. Board gave way + drill pipe fell with reserve pit. Due to low structural position + poor sample strands, it was decided by all concerned parties to plug + abandon the well.

Marc Downing

LEGEND



Vis: 56 Wt: 9.4
 DST #1
 4360 - 4384
 30-30-30-30
 I.F. - Surf blow
 F.F. - Dead
 IFP: 20-25
 FFP: 31-85
 SZP: 1107-1029
 HP: 2184 - 2099
 Rec:
 10' succ w/ oil spots, 2% w
 BHT: 121°
 * Board gave way while tripping in hole after DST #1.



DRILL STEM TEST REPORT

Prepared For: **H&C Oil Operating Inc.**

PO Box 86
Plainville KS 67663

ATTN: Marc Downing

L.D.N. #19-1

19-17s-26w Ness,KS

Start Date: 2013.05.08 @ 11:53:53

End Date: 2013.05.08 @ 18:57:08

Job Ticket #: 53207 DST #: 1

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2013.05.15 @ 10:14:44



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

H&C Oil Operating Inc.

19-17s-26w Ness, KS

PO Box 86
Plainville KS 67663

L.D.N. #19-1

ATTN: Marc Downing

Job Ticket: 53207

DST#: 1

Test Start: 2013.05.08 @ 11:53:53

GENERAL INFORMATION:

Formation: **Ft. Scott**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 14:35:08

Time Test Ended: 18:57:08

Test Type: Conventional Bottom Hole (Initial)

Tester: Tate Lang

Unit No: 55

Interval: 4360.00 ft (KB) To 4384.00 ft (KB) (TVD)

Reference Elevations: 2517.00 ft (KB)

Total Depth: 4384.00 ft (KB) (TVD)

2505.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Good

KB to GR/CF: 12.00 ft

Serial #: 6667 Inside

Press @ Run Depth: 35.35 psig @ 4361.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.05.08

End Date:

2013.05.08

Last Calib.: 2013.05.08

Start Time: 11:54:08

End Time:

18:57:08

Time On Btm: 2013.05.08 @ 14:34:38

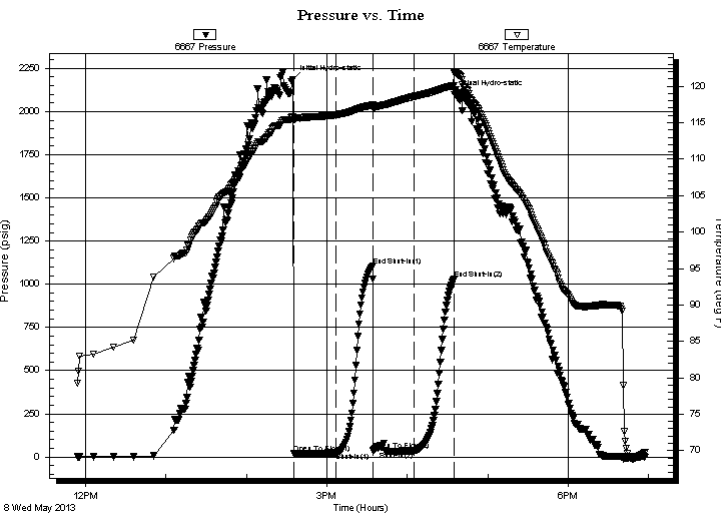
Time Off Btm: 2013.05.08 @ 16:35:08

TEST COMMENT: Weak surface blow

Dead no blow

Dead no blow

Dead no blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2186.32	115.83	Initial Hydro-static
1	20.47	115.40	Open To Flow (1)
32	24.92	116.10	Shut-In(1)
60	1106.56	117.42	End Shut-In(1)
60	38.15	117.11	Open To Flow (2)
91	35.35	118.59	Shut-In(2)
120	1028.95	120.08	End Shut-In(2)
121	2098.67	121.91	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	2%W 98%M w ith oil spots	0.05

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

H&C Oil Operating Inc.

19-17s-26w Ness, KS

PO Box 86
Plainville KS 67663

L.D.N. #19-1

Job Ticket: 53207

DST#: 1

ATTN: Marc Downing

Test Start: 2013.05.08 @ 11:53:53

Tool Information

Drill Pipe:	Length: 4045.00 ft	Diameter: 3.80 inches	Volume: 56.74 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 20000.00 lb
Drill Collar:	Length: 310.00 ft	Diameter: 2.25 inches	Volume: 1.52 bbl	Weight to Pull Loose: 70000.00 lb
			<u>Total Volume: 58.26 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	15.00 ft			String Weight: Initial 60000.00 lb
Depth to Top Packer:	4360.00 ft			Final 60000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	24.00 ft			
Tool Length:	44.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4341.00	
Shut In Tool	5.00			4346.00	
Hydraulic tool	5.00			4351.00	
Packer	5.00			4356.00	20.00 Bottom Of Top Packer
Packer	4.00			4360.00	
Stubb	1.00			4361.00	
Recorder	0.00	6667	Inside	4361.00	
Recorder	0.00	8368	Outside	4361.00	
Perforations	18.00			4379.00	
Bullnose	5.00			4384.00	24.00 Bottom Packers & Anchor
Total Tool Length:	44.00				



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

H&C Oil Operating Inc.

19-17s-26w Ness,KS

PO Box 86
Plainville KS 67663

L.D.N. #19-1

Job Ticket: 53207

DST#: 1

ATTN: Marc Downing

Test Start: 2013.05.08 @ 11:53:53

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: 56.00 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
10.00	2%W 98%M with oil spots	0.049

Total Length: 10.00 ft Total Volume: 0.049 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

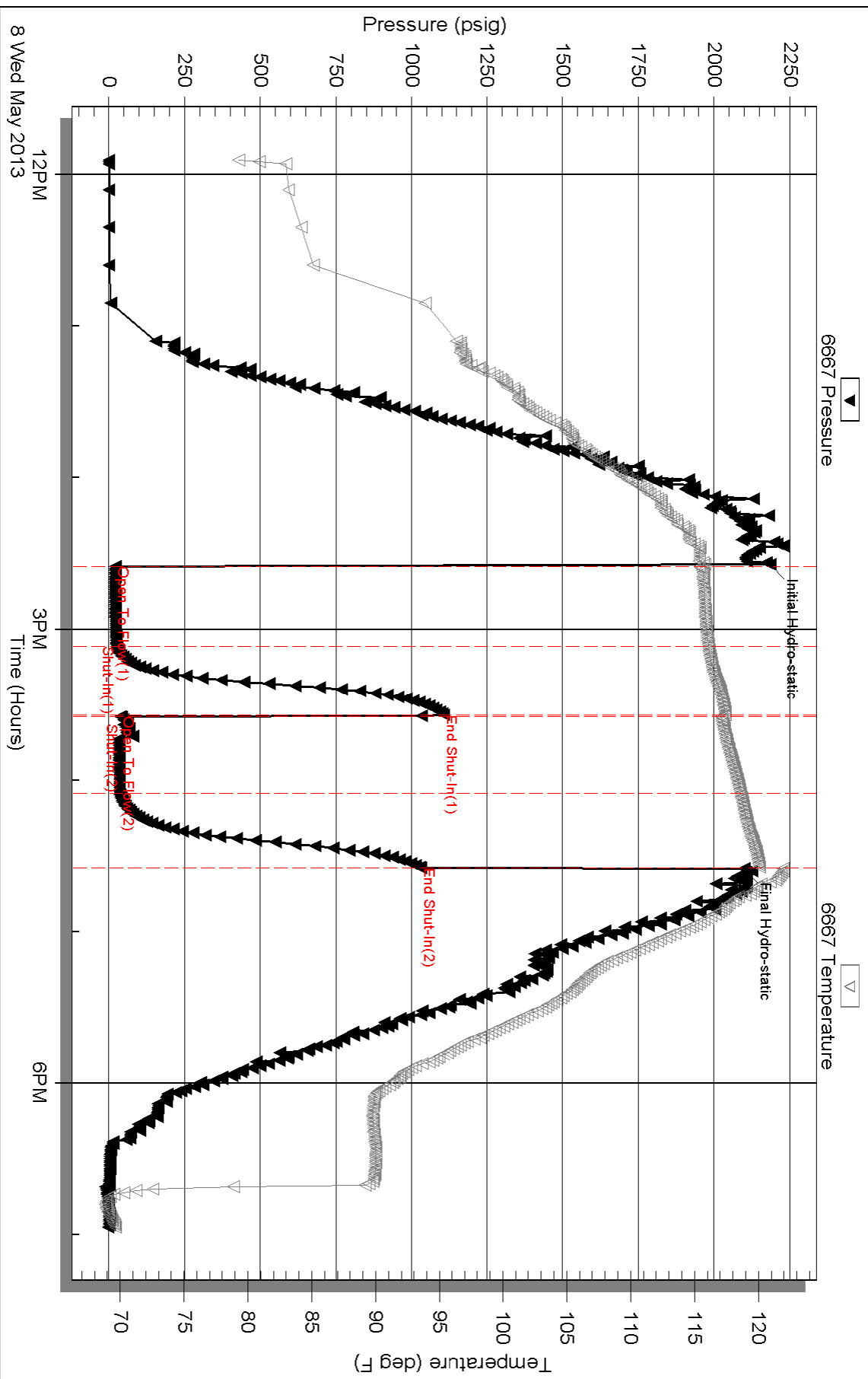
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time

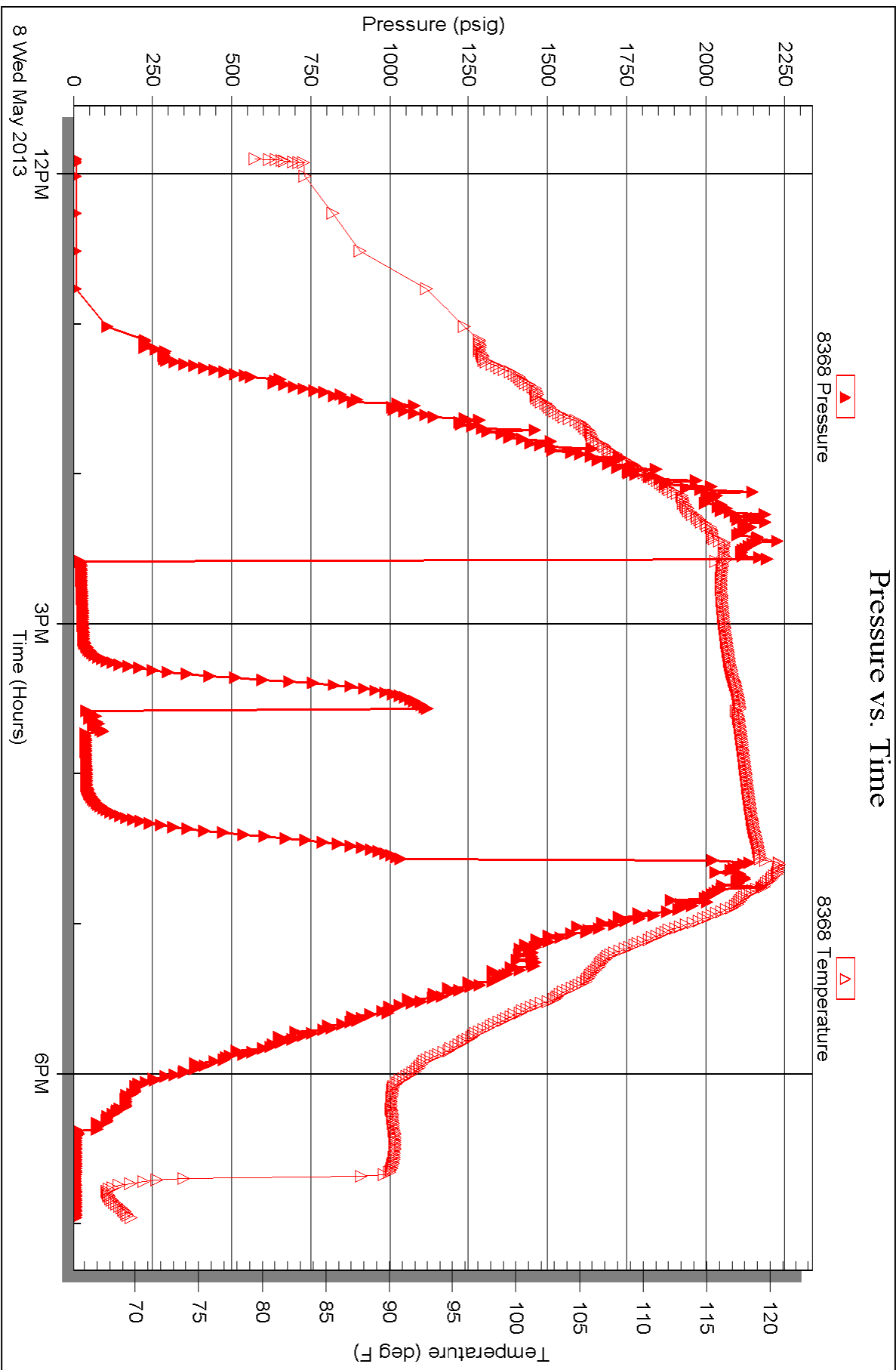


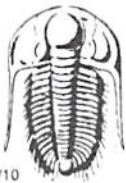
Serial #: 8368

Outside H&C Oil Operating Inc.

L.D.N. #19-1

DST Test Number: 1





TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 53207

Well Name & No. Washington #19-1 Test No. 1 Date 5-8-13
 Company H&C Oil Operating INC. Elevation 2505 KB 2517 GL
 Address PO Box 36 Plainville MS, 67663
 Co. Rep / Geo. Marc Downing Rig H2 Rig # 3
 Location: Sec. 19 Twp. 17 Rge. 26 Co. Ness State MS

Interval Tested 4360 4384 Zone Tested Ft. Scotty
 Anchor Length 24 Drill Pipe Run 4045 Mud Wt. 9.4
 Top Packer Depth 4356 Drill Collars Run 300 Vis 56
 Bottom Packer Depth 4360 Wt. Pipe Run 0 WL 8.0
 Total Depth 4384 Chlorides 400 ppm System LCM 2nd

Blow Description Weak surface blow
Dead no blow
Dead no blow
Dead no blow

Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec <u>10</u>	Feet of <u>VSWCM with oil spots</u>	%gas	%oil <u>2</u>	%water <u>98</u>	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 10 BHT 121 Gravity _____ API RW _____ @ _____ °F Chlorides _____ ppm

(A) Initial Hydrostatic 2186 Test 1250 T-On Location 10:30
 (B) First Initial Flow 20 Jars _____ T-Started 11:53
 (C) First Final Flow 25 Safety Joint _____ T-Open 14:35
 (D) Initial Shut-In 1107 Circ Sub N/C T-Pulled 16:35
 (E) Second Initial Flow 30 Hourly Standby _____ T-Out 18:55
 (F) Second Final Flow 35 Mileage 95 RT x2 294.50 Comments Load tools
 (G) Final Shut-In 1029 Sampler _____ 5-9-13
 (H) Final Hydrostatic 2099 Straddle _____ Ruined Shale Packer _____
 Shale Packer _____ Ruined Packer _____
 Extra Packer _____ Extra Copies _____
 Initial Open 30 Extra Recorder _____ Sub Total 0
 Initial Shut-In 30 Day Standby _____ Total 1544.50
 Final Flow 30 Accessibility _____ MP/DST Disc't _____
 Final Shut-In 30 Sub Total 1544.50

Approved By _____ Our Representative [Signature]
 Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

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 15, 2013

Charles Ramsay
H & C Oil Operating Inc.
PO BOX 86
PLAINVILLE, KS 67663-0086

Re: ACO1
API 15-135-25585-00-00
L.D.N. 19-1
SW/4 Sec.19-17S-26W
Ness 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,
Charles Ramsay

ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:

AMERINDIA

DATE <u>5-10-13</u>	SEC. <u>19</u>	TWP. <u>17</u>	RANGE <u>28</u>	CALLED OUT <u>9:00 AM</u>	ON LOCATION <u>11:00 AM</u>	JOB START <u>2:15 PM</u>	JOB FINISH <u>7:30 PM</u>
LEASE <u>LON</u>	WELL # <u>19-1</u>	LOCATION <u>Baden 8 1/2 N, 21 D, 1 S, W/2</u>		COUNTY <u>Wade</u>	STATE <u>LA</u>		

CONTRACTOR H2 July #3 OWNER Some

TYPE OF JOB Plug
 HOLE SIZE 7 1/8 T.D. 4384
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 1700
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

CEMENT
 AMOUNT ORDERED 230 lb 69/40 450 lb
1/4 # 8 round job
 COMMON 138 @ 17.90 = 2.470.20
 POZMIX 92 @ 9.35 = 860.20
 GEL 8 @ 23.40 = 187.20
 CHLORIDE _____ @ _____
 ASC _____ @ _____
No Seal 58 @ 2.97 = 172.26

EQUIPMENT

PUMP TRUCK	CEMENTER <u>Tom Nishan</u>
# <u>597</u>	HELPER <u>Charles King</u>
BULK TRUCK	DRIVER <u>Manly Spangberg</u>
# <u>544-198</u>	
BULK TRUCK	DRIVER _____
# _____	

HANDLING 247.16 @ 3.48 = 612.25
 MILEAGE 10.31 X 22 Y @ 2.60 = 589.73
 TOTAL 4.892.54

REMARKS:

Sole at 1900'
80 lb at 1030'
50 lb at 300'
20 lb at 20'
Sole in Baden

Baden

CHARGE TO: A-S-G Oil operating
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 1700
 PUMP TRUCK CHARGE 2249.84
 EXTRA FOOTAGE _____ @ _____
 MILEAGE Hum 22 @ 7.70 = 169.90
 MANIFOLD LVM 22 @ 4.40 = 96.80
 TOTAL 2.516.54

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested 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 done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (if Any) _____
 TOTAL CHARGES 7.408.58
 DISCOUNT 1.481.21 IF PAID IN 30 DAYS
5.926.85

PRINTED NAME STEVEN CRAIG
 SIGNATURE Steven Craig

