



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: _____



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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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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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

June 19, 2013

Chris Leiker
Black Tea Oil, LLC
1011 Centennial Blvd., Ste B
Hays, KS 67601

Re: ACO1
API 15-165-22000-00-00
Revis 1
NW/4 Sec.27-18S-16W
Rush 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,
Chris Leiker

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

June 21, 2013

Chris Leiker
Black Tea Oil, LLC
1011 Centennial Blvd., Ste B
Hays, KS 67601

Re: ACO-1
API 15-165-22000-00-00
Revis 1
NW/4 Sec.27-18S-16W
Rush County, Kansas

Dear Chris Leiker:

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 11/19/2012 and the ACO-1 was received on June 19, 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

ALLIED OIL & GAS SERVICES, LLC 059131

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Greer Bend, KS

Rev. 1.5

DATE <u>1-29-12</u>	SEC. <u>27</u>	TWP. <u>18</u>	RANGE <u>16</u>	CALLED OUT	ON LOCATION	JOB START <u>9:30</u>	JOB FINISH <u>10:30</u>
LEASE <u>Bev's</u>	WELL # <u>1</u>	LOCATION <u>Albert Jks SW 1/25 E. 11 RD</u>			COUNTY <u>Rush</u>	STATE <u>KS</u>	
OLD OR <u>(NEW)</u> (Circle one)						1.01 6.3	

CONTRACTOR Landmark Drilling #2 OWNER _____

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. _____

CASING SIZE 8 1/8 DEPTH 1060.37

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 33 FT

PERFS. _____

DISPLACEMENT 65,44 bbl's freshwater

EQUIPMENT _____

CEMENT			
AMOUNT ORDERED	<u>310 SKS 60# class A 40Y</u>		
	<u>102 3/4cc 2 1/2 gal</u>		
	<u>175 SKS class A 3/4cc 2 1/2 gal</u>		
COMMON	<u>186</u>	@ <u>17.90</u>	<u>3,329.40</u>
POZMIX	<u>124</u>	@ <u>9.35</u>	<u>1,159.40</u>
GEL	<u>8</u>	@ <u>23.40</u>	<u>187.20</u>
CHLORIDE	<u>16</u>	@ <u>64.00</u>	<u>1,024.00</u>
ASC		@	
	<u>175 SK class</u>	@ <u>17.90</u>	<u>3,132.50</u>
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>521.22</u>	@ <u>2.48</u>	<u>1,292.08</u>
MILEAGE	<u>22.61 x 22X</u>	@ <u>2.60</u>	<u>1,293.28</u>
			<u>TOTAL 11,418.41</u>

PUMP TRUCK CEMENTER 2 Quon Chamber's 1

366 HELPER Kevin Eddy 2

BULK TRUCK _____

344-12 DRIVER Kevin Weighman 3

BULK TRUCK _____

492-12 DRIVER Joel Monahan 2

REMARKS:

Break circulation with Big Mud

mix 47,97 bbl's 60# 3/4cc 2 1/2 gal

mix 27,12 bbl's class A 3/4cc 2 1/2 gal

shut down & Release plug

Displace 65,44 bbl's freshwater

hand plug pressure - 700# plug down - (dis) 1/2 hr

Cement did circulate

plug down

plug

499.42

SERVICE

DEPTH OF JOB	<u>1060</u>		
PUMP TRUCK CHARGE	<u>2213.75</u>		
EXTRA FOOTAGE		@	
MILEAGE	<u>hvm 22</u>	@ <u>7.70</u>	<u>169.40</u>
MANIFOLD		@	
	<u>hvm 22</u>	@ <u>4.40</u>	<u>96.80</u>
		@	

CHARGE TO: Black tea oil LLC

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 2,479.25

PLUG & FLOAT EQUIPMENT

<u>1 4 3/4 Inset</u>	@ <u>446.94</u>	<u>446.94</u>
<u>1 Rubber Rubber plug</u>	@ <u>131.04</u>	<u>131.04</u>
	@	
	@	
	@	

TOTAL 577.28

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) 592.85

TOTAL CHARGES 14,476.34

DISCOUNT 258 3,619.08 IF PAID IN 30 DAYS

PRINTED NAME X Kirk F Denning

SIGNATURE X Kirk F Denning

Thank You!!

10,857.26

ALLIED OIL & GAS SERVICES, LLC 059122

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Great Bend, KS

DATE <u>12-3-12</u>	SEC. <u>27</u>	TWP. <u>18</u>	RANGE <u>16W</u>	CALLED OUT <u>4:30 PM</u>	ON LOCATION <u>6:10 PM</u>	JOB START <u>10:30 AM</u>	JOB FINISH <u>11:30 AM</u>
LEASE <u>Revis</u>			WELL# <u>1</u>	LOCATION		COUNTY <u>Rush</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)						<u>1.03</u>	<u>to 3 all</u>

CONTRACTOR Landmark 2 OWNER Black Tee Oil, LLC

TYPE OF JOB <u>PTA</u>	
HOLE SIZE <u>7 7/8</u>	T.D. <u>3692'</u>
CASING SIZE <u>8 3/8" 24"</u>	DEPTH <u>1060</u>
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2 16.6</u>	DEPTH <u>3645'</u>
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

CEMENT
AMOUNT ORDERED 190 5% 60/40 + 4% Gel + 25% Flow Seal

EQUIPMENT	
PUMP TRUCK # <u>366</u>	CEMENTER <u>Charles Ellis 1</u> HELPER <u>Trint Holl 2</u>
BULK TRUCK # <u>344/170</u>	DRIVER <u>Joel Henckens 2</u>
BULK TRUCK #	DRIVER

COMMON	<u>114</u>	@	<u>17.90</u>	<u>2,040.60</u>
POZMIX	<u>76</u>	@	<u>9.35</u>	<u>710.60</u>
GEL	<u>7</u>	@	<u>23.40</u>	<u>163.80</u>
CHLORIDE		@		
ASC		@		
<u>flabral</u>	<u>48</u>	@	<u>2.97</u>	<u>142.56</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>204.09</u>	@	<u>2.48</u>	<u>506.24</u>
MILEAGE	<u>8.52 x 22 x</u>	@	<u>2.60</u>	<u>487.39</u>
TOTAL				<u>4,051.99</u>

REMARKS:
Set 8 3/8" @ 3645'; 6 FW, 12.5 cement, 2 FW, 44 WAM (505)
Set P/B, 2 @ 1090'; 6 FW, 12.5 cement, 10 FW (505)
Set P/B, 3 @ 400'; 6 FW, 10 cement, 2 FW (405)
Set P/B, 4 @ 60'; 5 cement, 1 FW (205)
Plug Ret Hole with 7.5 35% (35%) cement

187.44

SERVICE				
DEPTH OF JOB	<u>3645</u>			
PUMP TRUCK CHARGE	<u>2600.42</u>			
EXTRA FOOTAGE		@		
MILEAGE	<u>1400 22</u>	@	<u>7.70</u>	<u>169.40</u>
MANIFOLD		@		
	<u>22</u>	@	<u>4.40</u>	<u>96.80</u>
		@		
TOTAL				<u>2,866.67</u>

CHARGE TO: Black Tee Oil
STREET _____
CITY _____ STATE _____ ZIP _____

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.

PLUG & FLOAT EQUIPMENT				
		@		
		@		
		@		
		@		
		@		
TOTAL				

PRINTED NAME Kirk F Dunning
SIGNATURE Kirk F Dunning

SALES TAX (if Any)	<u>435.81</u>
TOTAL CHARGES	<u>6,917.21</u>
DISCOUNT <u>25%</u>	<u>1,729.42</u>
	<u>5,188.39</u>

IF PAID IN 30 DAYS

KANSAS CORPORATION COMMISSION



Conservation Division
130 South Market, Suite 2078
Wichita, Kansas 67202-3801
316-337-6200
Fax: 316-337-6211
FEIN: 48-1124839

INVOICE Customer Copy

BLACK TEA OIL, LLC
2736 COLONIAL, APT. D4
HAYS KS 67601

Invoice Date: December 21, 2012
Invoice Number: 2013060837
Fed ID:
Due Date: January 05, 2013

Order Number: 29091		Contact:		Order Date: December 21, 2012	
Item	Qty	Acct Code / Service Description	Details	Unit Price	Total
1	3693	505 / Well Plugging > 1077 feet	15-165-22000-0000 REVIS 1 27-18S-16W	\$0.0325	120.02
<i>KCC Contact: MARCOTTE, MARJORIE</i>				Order Subtotal:	\$120.02

IMPORTANT!
*Please Return One Copy of Invoice
with Your Payment
in Order to ensure Correct Credit to Your Account*

Order Total: \$120.02
Shipping Charges: 0.00
Invoice Total: \$120.02