



KANSAS CORPORATION COMMISSION 1149427
OIL & GAS CONSERVATION DIVISION

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 # _____

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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Form	ACO1 - Well Completion
Operator	REH Oil and Gas LLC
Well Name	Bouziden 12-1
Doc ID	1149427

Tops

Name	Top	Datum
Douglas Shale	4463	-2620
Lansing	4526	-2683
Stark	4973	-3130
Marmaton	5115	-3272
Pawnee	5218	-3375
Cherokee Shale	5273	-3430
Morrow Shale	5388	-3545
Mississippian	5496	-3653

QUALITY WELL SERVICE, INC.

5717

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410
Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	11-1-12	Sec.	12	Twp.	34	Range	21	County	Clark	State	KS	On Location		Finish	5:00
Lease	Boziden		Well No.			12-1		Location							
Contractor	Mid Continent Conductor							Owner							
Type Job	Conductor							To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Hole Size	32'		T.D.			70		Charge To							
Csg.	20'		Depth			72		Rob oil + Gas							
Tbg. Size								Street							
Tool								City				State			
Cement Left in Csg.	10'		Shoe Joint			The above was done to satisfaction and supervision of owner agent or contractor.									
Meas Line			Displace			21.7		Cement Amount Ordered							
EQUIPMENT								3% CC							
Pumptrk	6	No.	David					Common							
Bulktrk	7	No.	David					230							
Bulktrk		No.						Poz. Mix							
Pickup		No.						Gel. 4							
								Calcium 8							
JOB SERVICES & REMARKS								Hulls							
Rat Hole								Salt							
Mouse Hole								Flowseal							
Centralizers								Kol-Seal							
Baskets								Mud CLR 48							
D/V or Port Collar								CFL-117 or CD110 CAF 38							
								Sand							
Mixed and pumped 230 sx common								Handling 242							
2% Gel 3% CC Displaced with 21.7H								Mileage 70							
4" shot in 200 psi.								FLOAT EQUIPMENT							
								Guide Shoe							
								Centralizer							
								Baskets							
								AFU Inserts							
								Float Shoe							
								Latch Down							
								Pumptrk Charge							
								Conductor							
								Mileage 70							
								Tax							
								Discount							
								Total Charge							
Signature								Rob Harper							

ALLIED OIL & GAS SERVICES, LLC 059704

Federal Tax I.D.# 20-5975804

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

SERVICE POINT: Medicine Lodge KS

Bouziden 12-1

DATE <u>12/07/12</u>	SEC. <u>12</u>	TWP. <u>34s</u>	RANGE <u>21w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>1045AA</u>
LEASE <u>Bouziden</u>	WELL # <u>21-1</u>	LOCATION <u>Sitka KS, 3 south to Rd X, 3 East to</u>	COUNTY <u>Clark</u>	STATE <u>KS</u>			
OLD OR <input checked="" type="checkbox"/> NEW (Circle one)			East side of White Tanks, South/East side across CG				

CONTRACTOR Sturking #2 OWNER Reh Oil + Gas

TYPE OF JOB Sec. Op

HOLE SIZE <u>17 1/2</u>	T.D. <u>397</u>
CASING SIZE <u>13 3/8</u>	DEPTH <u>393</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>1564</u>	
PERFS.	
DISPLACEMENT <u>59 1/4 BBL</u>	

CEMENT

AMOUNT ORDERED 200 sx 65:35:6% Gel + 3% cet
4 #Floscal, 150 sx Class A + 3% cc + 2% Gel

COMMON Class A	150 sx @ 17.90	2685
POZMIX	@	
GEL	3 sx @ 23.40	70.20
CHLORIDE	12 sx @ 64	768
ASC	@	
Allied Light Cement Type 1 Class A 200	@ 16.50	3300
Floscal	50 lbs @ 2.97	148.5

EQUIPMENT

PUMP TRUCK	CEMENTER <u>Jason Thimmesch</u> 1
#548/545	HELPER <u>Jake Heard</u> 3
BULK TRUCK	
#356/290	DRIVER <u>Jonas Bowen / David Felix</u> 3
BULK TRUCK	
#	DRIVER

HANDLING	390.86	cut @ 2.48	969.33	
MILEAGE	16.91	trax 40	mix 2.60	1758.64
			TOTAL <u>9699.67</u>	

676.40

REMARKS:

Did circ cement

SERVICE

DEPTH OF JOB	<u>393</u>		
PUMP TRUCK CHARGE	<u>1512.25</u>		
EXTRA FOOTAGE	@		
MILEAGE	40 mi @ 7.70	308	
MANIFOLD	@		
LV	40 mi @ 4.40	176	
			TOTAL <u>1996.25</u>

CHARGE TO: Reh Oil + Gas

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>13 3/8</u>			
Bucket	@ 773.37	773.37	
	@		
	@		
	@		
	@		
			TOTAL <u>773.37</u>

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) 487.93

TOTAL CHARGES 12469.29

DISCOUNT 3117.33 IF PAID IN 30 DAYS

(NET) 9351.96

PRINTED NAME [Signature]

SIGNATURE [Signature]

ALLIED OIL & GAS SERVICES, LLC 053399

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Liberal KS

DATE <u>12-14-12</u>	SEC. <u>12</u>	TWP. <u>34s</u>	RANGE <u>21w</u>	CALLED OUT	ON LOCATION	JOB START <u>6:00 Am</u>	JOB FINISH <u>7:00 Am</u>
LEASE <u>Boziden</u>		WELL# <u>21-1</u>	LOCATION <u>Vec Si+ka KS.</u>		COUNTY <u>Clark</u>	STATE <u>KS.</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Sterling #2

TYPE OF JOB OTA

HOLE SIZE 7 7/8" T.D.

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE 4 1/2" X Hole DEPTH 1000'

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER 1.03 60.3 well

CEMENT

AMOUNT ORDERED 220^{SK} 60/40/

4% Gel

EQUIPMENT

PUMP TRUCK CEMENTER Kenny B.

531-541 HELPER Cesar P.

BULK TRUCK

467-528 DRIVER Ruben C.

BULK TRUCK

DRIVER

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

Light Weight 220 @ 15.95 3504.00

HANDLING 220 @ 2.48 545.60

MILEAGE 1023.20

393.53 TOTAL 5077.80

REMARKS:

THANK You!!

SERVICE

DEPTH OF JOB 1000'

PUMP TRUCK CHARGE 1250.00

EXTRA FOOTAGE @

MILEAGE 40 @ 7.70 308.00

MANIFOLD @

Light V Mileage 40 @ 4.40 176.00

Stand By Time 4HR @ 440 880

Charge Only 2 HR

TOTAL 2614.00

CHARGE TO: REH 0:14 Gas

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

N/A

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

To: Allied Oil & Gas Services, LLC.

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PRINTED NAME _____

SIGNATURE [Signature]

TOTAL 0

SALES TAX (If Any) 484.58

TOTAL CHARGES \$ 7691.80

DISCOUNT 1922.95 IF PAID IN 30 DAYS

\$ 5768.85 Net.