



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1149365
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: _____



1149365

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Carmen Schmitt, Inc.
Well Name	Thompson Unit 1
Doc ID	1149365

Tops

Name	Top	Datum
Anhydrite	1265	861
Heebner	3609	-1483
Lansing	3660	-1534
Base Kansas City	3978	-1852
Fort Scott	4146	-2020
Cherokee Shale	4162	-2036
Cherokee "A" Sand	4170	-2044
Mississippian	4216	-2090
Gilmore City	4275	-2149



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
2/24/2013	23822

BILL TO
Carmen Schmitt, Inc. P. O. Box 47 915 Harrison Great Bend, KS 67530-0047

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1	Thompson Unit	Pawnee	Mallard JV	Oil	Development	Cement LongStri...	Blaine
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				30	Miles	6.00	180.00
578D-L	Pump Charge - Long String				1	Job	1,500.00	1,500.00
402-4	4 1/2" Centralizer				10	Each	65.00	650.00T
403-4	4 1/2" Cement Basket				1	Each	250.00	250.00T
406-4	4 1/2" Latch Down Plug & Baffle				1	Each	225.00	225.00T
407-4	4 1/2" Insert Float Shoe With Auto Fill				1	Each	300.00	300.00T
419-4	4 1/2" Rotating Head Rental				1	Each	200.00	200.00T
325	Standard Cement				175	Sacks	13.50	2,362.50T
284	Calseal				8	Sack(s)	35.00	280.00T
283	Salt				900	Lb(s)	0.20	180.00T
285	CFR-1				100	Lb(s)	4.00	400.00T
276	Flocele				50	Lb(s)	2.00	100.00T
281	Mud Flush				500	Gallon(s)	1.25	625.00T
221	Liquid KCL (Clayfix)				2	Gallon(s)	25.00	50.00T
290	D-Air				2	Gallon(s)	35.00	70.00T
581D	Service Charge Cement				175	Sacks	2.00	350.00
583D	Drayage				274.5	Ton Miles	1.00	274.50
	Subtotal							7,997.00
	Sales Tax Pawnee County						8.30%	472.48
	17792.0001							
	710/43							
	"Cement pdu csg"							
	Well file							

We Appreciate Your Business!

Total

\$8,469.48



CHARGE TO: Carmen Schmidt
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
 N° 23822

PAGE 1 OF 2

SERVICE LOCATIONS
 1. Ness City KS WELL/PROJECT NO. #1 LEASE Thompson Unit COUNTY/PARISH Pawnee STATE KS CITY Burdett DATE 24 Feb 13 OWNER
 2. TICKET TYPE SERVICE SALES CONTRACTOR maures JV RIG NAME/NO. SHIPPED VIA CT DELIVERED TO location ORDER NO.
 3. WELL TYPE o.i.l WELL CATEGORY Development JOB PURPOSE Cement long string WELL PERMIT NO. WELL LOCATION 3-21-20
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE TRK 114	30	mi			6.00	180.00
578		1			Pump Charge	1	ea			1500.00	1500.00
402		1			Centralizer	4 1/2	in	10	00	65.00	680.00
403		1			Cement Basket	4 1/2	in	1	ea	250.00	250.00
406		1			Latch down Plug & baffle	4 1/2	in	1	ea	225.00	225.00
407		1			Insert float shoe w/ASTOFIL	4 1/2	in			300.00	300.00
419		1			Rotating head rental	4 1/2	in	1	ea	200.00	200.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X Curtis Hitchman
 DATE SIGNED TIME SIGNED A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				1-3305 2377
WE UNDERSTOOD AND MET YOUR NEEDS?				2-4692 5682
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				sub total 7997
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Pawnee TAX 8.3%
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				47.2 48
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL 8469 48

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR Reyall APPROVAL

Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 23822

CUSTOMER *Carmen Schadt* WELL _____ DATE *24 Feb 13* PAGE *2* OF *2*

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			QTY.	U/M	QTY.	U/M		
325		1				standard cement (For SA-2)	175	sk			13.50	2362.50
284		1				calseal	800	lb	8	sk	35.00	280.00
283		1				salt	900	lb			0.20	180.00
285		1				CFR-1	100	lb			4.00	400.00
276		1				flocle	50	lb			2.00	100.00
281		1				mudflush	500	gal			1.25	625.00
221		1				RCH liquid	2	gal			25.00	50.00
290		1				D-AIR	2	gal			35.00	70.00
581						SERVICE CHARGE	175				2.00	350.00
583						MILEAGE CHARGE	TOTAL WEIGHT 18300	LOADED MILES 30	TON MILES 274.5		1.00	274.50

CONTINUATION TOTAL ~~4377~~ 00

692

JOB LOG

SWIFT Services, Inc.

DATE **2-24-73** PAGE NO. **1**

CUSTOMER		WELL NO. #		LEASE		JOB TYPE		TICKET NO.	
Carmen Schmidt		#1		Tompson		Cement 5 1/2" Logging		23822	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
								TD-4320	TP-4320
								SS- #44.20	4 1/2 10.5"
								Centralizer - #1 #2 #3 #4 #5 #7 #9 #11 #13 #15	
								Basket - #2	
								175 sks EA-2 w/ 1/4" Floccle	
	1800							on location	
	1815							Start 4 1/2 10.5" casing in well	
	2000							Drop ball circulate - Rotate -	
	2033	6 3/4	12		✓	300		Pump 500 gal Mnd Flush	
		6 3/4	20		✓	300		Pump 20 bbl KCL Flush	
			7-5					Plug RH - MH (30sks - 20sks)	
	2046	4 1/2	30		✓	250		Mix 125 sks EA-2 @ 15.5 ppg	
								Release Latch down plug	
								Wash out Pump & Line	
	2102	6 3/4	0		✓	100		Start Displacement	
		6 3/4	55		✓	300		Lift PSD	
		6 3/4	67.5		✓	650		Max Lift PSD	
	2113	6 3/4	67.9		✓	1500		Land Latch down Plug	
								Release PSD - Hold -	
								Wash up truck	
	2200							Job Complete	

Thank You
Dave Blaine JS Isaac

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 6514

Date	2-10-13	Sec.	3	Twp.	21	Range	20	County	Pawnee	State	KS	On Location	Finish	5:30 A.M.	
								Location <u>Alexander 145 1/2 E 1/25 E into</u>							
Lease		<u>Thompson Unit</u>				Well No.		<u>1</u>							
Contractor		<u>Mallard</u>						Owner To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Type Job		<u>Surface</u>						Charge To <u>Carmen Schmitt</u>							
Hole Size		<u>12 1/4</u>				T.D.		<u>1265</u>							
Csg.		<u>8 5/8</u>				Depth		<u>1264</u>							
Tbg. Size						Depth									
Tool						Depth		The above was done to satisfaction and supervision of owner agent or contractor.							
Cement Left in Csg.		<u>42.09</u>				Shoe Joint		<u>42.09</u>							
Meas Line						Displace		<u>77 3/4 BBL</u>							
		EQUIPMENT						Common <u>450</u>							
Pumptrk		<u>9</u>				No. Cementer		<u>Chris</u>							
						No. Helper									
Bulktrk						No. Driver		<u>604</u>							
						No. Driver									
Bulktrk		<u>13</u>				No. Driver		<u>Heath</u>							
						No. Driver									
								Hulls							
Remarks:								Salt							
Rat Hole								Flowseal							
Mouse Hole								Kol-Seal							
Centralizers								Mud CLR 48							
Baskets								CFL-117 or CD110 CAF 38							
D/V or Port Collar								Sand							
		<u>8 5/8 on bottom Best Circulation</u>						Handling <u>475</u>							
		<u>Mix 450 LK Displace Plug</u>						Mileage							
		<u>Plug 200ft shot in 50ft</u>						FLOAT EQUIPMENT							
		<u>Cement Circulated</u>						Guide Shoe							
								Centralizer <u>8 5/8 Rubber Plug</u>							
								Baskets <u>8 5/8</u>							
								<u>Baffle Plate</u>							
								AFU Inserts							
								Float Shoe							
								Latch Down							
								Pumptrk Charge <u>Long Surface</u>							
								Mileage <u>35</u>							
								Tax							
								Discount							
								Total Charge							
X Signature															



QUALITY OILWELL CEMENTING, INC.
 PO Box 32 - 740 West Wichita Ave, Russell KS 67665
 Phone: 785-324-1041 fax: 785-483-1087
 Email: cementing@ruraltel.net

Date: 2/10/2013
 Invoice # 6514
 P.O.#:
 Due Date: 3/12/2013
 Division: Russell

Invoice

Contact:
 Carmen Schmitt Inc
Address/Job Location:
 Carmen Schmitt Inc
 P.O. Box 47
 Great Bend Ks 67530

Reference:
 THOMPSON UNIT 1

Description of Work:
 LONG SURFACE JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 991.39	No				
Common-Class A	450	\$ 6,126.69	Yes				
Bulk Truck Matl-Material Service Charge	475	\$ 1,031.43	No				
Calcium Chloride	16	\$ 827.92	Yes				
Pump Truck Mileage-Job to Nearest Camp	35	\$ 379.24	No				
Bulk Truck Mileage-Job to Nearest Bulk Plant	35	\$ 221.92	No				
Premium Gel (Bentonite)	9	\$ 159.08	Yes				
8 5/8" Top Rubber Plug	1	\$ 115.09	Yes				
Baffle Plate Aluminum, 8 5/8"	1	\$ 97.71	Yes				

Invoice Terms:

Net 30 SubTotal: \$ 9,950.46
 Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (1,492.57)

SubTotal for Taxable Items:	\$ 6,227.51
SubTotal for Non-Taxable Items:	\$ 2,230.38
Total:	\$ 8,457.89
Tax:	\$ 516.88
Amount Due:	\$ 8,974.77
Applied Payments:	
Balance Due:	\$ 8,974.77

8.30% Pawnee County Sales Tax

Thank You For Your Business!

Past Due Invoices are subject to a service charge (annual rate of 24%)
 This does not include any applicable taxes unless it is listed.
 ©2008-2013 Straker Investments, LLC. All rights reserved.

17792.0051
 710/43
 "Cement Surface Csg"
 Wall File

COMPANY: Carman Schmitt, Inc.
WELL: Thompson Unit #1
FIELD: Wildcat

LOCATION: 2495' Sec 4 1109' Full
ELEVATION: KB 2124

COUNTY: Pawnee
STATE: Kansas

OPERATOR: Carman Schmitt, Inc.
CONTRACTOR: Mudd Drilling, Inc. #2
DATE: 2-8-13
COMP: 2-23-13
CASING RECORD
SRR: 8 3/4" @ 1240' PROD: 4 1/2" @ 431'
TOTAL DEPTH DRILLERS: 4320'
TOTAL DEPTH LOG: 4322'

FORMATION	SAMPLE TOP	ELECTRIC LOG TOP	SURF SEA POSITION	STRUCTURAL POSITION
Top Flashed Base Anhydrite	1241	1245	4861	T2
HEBNER	3467	3469	1876	NA
Hebner Foot scab	3479	3480	-1081	T8
Cherokee Sh.	3578	3579	-1281	T11
Cherokee Sand "A"	4168	4169	-2024	T19
Miss	4176	4176	-2034	T20
Gilmore City	4211	4211	-2076	T25

REFERENCE WELL FOR STRUCTURE: Folsom Expansion, Inc.
Thompson #1 owner: C-3A-NVA
Sec. 3-215-204

DRILL STEM TESTS

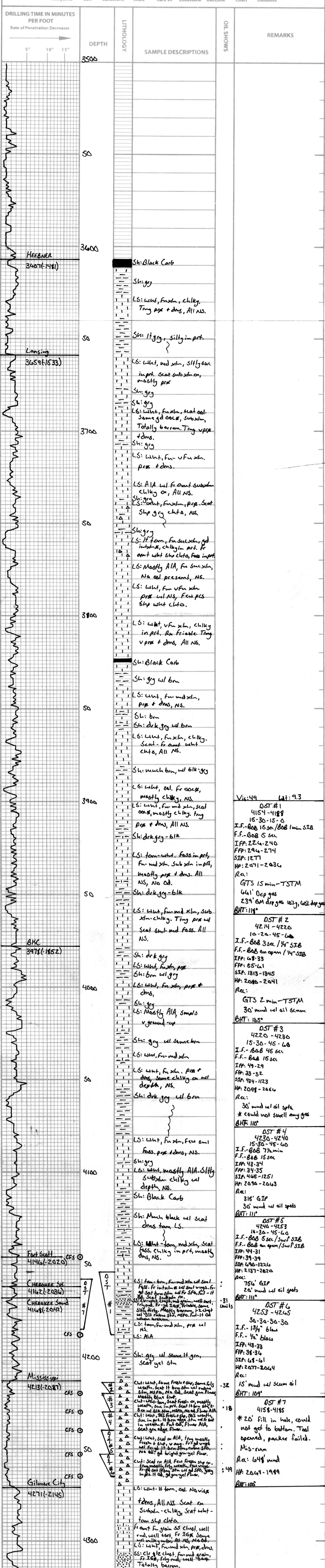
No.	DATE/TIME	DEPTH	DEPTH	DEPTH	HP/HP	RECOVERY

REMARKS AND RECOMMENDATIONS:
Due to structural position, DST recovery & log evaluation, it was decided to set 4 1/2" production casing for completion.

Production: Cherokee "A" Sand - 4169-72 (DST #1)

Marc Downing

LEGEND



Marc Downing

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 24, 2013

Carmen Schmitt
Carmen Schmitt, Inc.
PO BOX 47
GREAT BEND, KS 67530-0047

Re: ACO1
API 15-145-21705-00-00
Thompson Unit 1
SW/4 Sec.03-21S-20W
Pawnee 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,
Carmen Schmitt

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

July 01, 2013

Carmen Schmitt
Carmen Schmitt, Inc.
PO BOX 47
GREAT BEND, KS 67530-0047

Re: ACO-1
API 15-145-21705-00-00
Thompson Unit 1
SW/4 Sec.03-21S-20W
Pawnee County, Kansas

Dear Carmen Schmitt:

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 02/08/2013 and the ACO-1 was received on June 24, 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