



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1149661  
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: \_\_\_\_\_



1149661

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](mailto: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

<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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	RM Sterling 6
Doc ID	1149661

All Electric Logs Run

DUAL INDUCTION
NEUTRON DENSITY W/PE
MICRO
SONIC

Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	RM Sterling 6
Doc ID	1149661

Tops

Name	Top	Datum
Heebner	3855	-2387
KC	4370	-2902
BKC	4624	-3156
Miss	4798	-3330
Viola	5305	-3837
Simp Sh	5408	-3940
Arb	NR	NRq
RTD	5600	-4132
LTD	5601	-4133



# INVOICE

PO Box 93999  
Southlake, TX 76092

Invoice Number: 136012  
Invoice Date: Apr 30, 2013  
Page: 1

Voice: (817) 546-7282  
Fax: (817) 246-3361

Now Includes:

<b>Bill To:</b>
Lotus Operating Co., LLC Lotus Exploration Co. 100 S. Main, STE 420 Wichita, KS 67202

**RECEIVED**  
MAY 04 2013

Customer ID	Field Ticket #	Payment Terms	
Lotus	59818	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Apr 30, 2013	5/30/13

Quantity	Item	Description	Unit Price	Amount
135.00	MAT	RM Sterling#6 Class A Common	17.90	2,416.50
90.00	MAT	Pozmix	9.35	841.50
4.00	MAT	Gel	23.40	93.60
7.25	MAT	Chloride	64.00	464.00
241.00	SER	Cubic Feet	2.48	597.68
253.75	SER	Ton Miles	2.60	659.75
1.00	SER	Surface	1,512.25	1,512.25
25.00	SER	Heavy Vehicle Mileage	7.70	192.50
25.00	SER	Light Vehicle Mileage	4.40	110.00
1.00	CEMENTER	David Felio		
1.00	EQUIP OPER	Jake Heard		
1.00	OPER ASSIST	James Bowen		

GL# 9208  
DESC. Concrete surf. #6  
# 6  
  
WELL # Steu

Subtotal	6,887.78
Sales Tax	278.54
Total Invoice Amount	7,166.32
Payment/Credit Applied	
<b>TOTAL</b>	<b>7,166.32</b>

ALL PRICES ARE NET, PAYABLE  
30 DAYS FOLLOWING DATE OF  
INVOICE. 1 1/2% CHARGED  
THEREAFTER. IF ACCOUNT IS  
CURRENT, TAKE DISCOUNT OF

\$ 1377.56 *KL*

ONLY IF PAID ON OR BEFORE  
May 25, 2013

ENTERED  
MAY 07 2013

- 1377.56  
5,788.76

# ALLIED OIL & GAS SERVICES, LLC 059818

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:  
Medicine Lodge KS

DATE <u>04-30-13</u>	SEC <u>35</u>	TWP. <u>34s</u>	RANGE <u>13w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>10:15 AM</u>
LEASE <u>RM Steady</u> WELL # <u>6</u>			LOCATION <u>Handman ES, 2w, 2N, W/S</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Duke #7

TYPE OF JOB Surface

HOLE SIZE 14 3/4 T.D. 265'

CASING SIZE 10 3/4 + 8 1/2 DEPTH 246' + 17'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT N/A

CEMENT LEFT IN CSG. 20'

PERFS. \_\_\_\_\_

DISPLACEMENT 23 1/2 Bbls Fresh H<sub>2</sub>O

EQUIPMENT

OWNER Lotus

CEMENT AMOUNT ORDERED 225 sx 60:40: 2% gel + 3% cc

COMMON <u>A</u>	<u>135</u> sx @ <u>17.90</u>	<u>2416.50</u>
POZMIX	<u>90</u> sx @ <u>9.35</u>	<u>841.50</u>
GEL	<u>4</u> sx @ <u>23.40</u>	<u>93.60</u>
CHLORIDE	<u>7.25</u> @ <u>64.00</u>	<u>464.00</u>
ASC		
	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	<u>241</u> @ <u>2.48</u>	<u>597.68</u>
MILEAGE	<u>10.15 / 25 / 2.60</u>	<u>659.75</u>
		TOTAL <u>5073.03</u>

PUMP TRUCK CEMENTER D. Felio

# 360-265 HELPER J. Heard

BULK TRUCK

# 421-220 DRIVER Jim Bowen

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:  
See Job Log -

Mix 225sx 60:40 cement Blend  
Disp. w/ Fresh H<sub>2</sub>O - 23 1/2 Bbls  
Shut in - Cement D. & Circ.

CHARGE TO: Lotus

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.

PRINTED NAME Galen D. Frank

SIGNATURE Galen D. Frank

SERVICE

DEPTH OF JOB	<u>265'</u>	
PUMP TRUCK CHARGE	<u>1512.25</u>	
EXTRA FOOTAGE	@	
MILEAGE	<u>25</u> @ <u>7.70</u>	<u>192.50</u>
MANIFOLD	@	
<u>Light Vehicle</u>	<u>25</u> @ <u>4.40</u>	<u>110.00</u>
	@	
		TOTAL <u>1814.75</u>

PLUG & FLOAT EQUIPMENT

None

	@	
	@	
	@	
	@	
	@	
		TOTAL _____

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES 6887 78

DISCOUNT 20% IF PAID IN 30 DAYS

(NET) 5510 22



PO Box 93999  
Southlake, TX 76092

Voice: (817) 546-7282  
Fax: (817) 246-3361

# INVOICE

Invoice Number: 136199  
Invoice Date: May 6, 2013  
Page: 1

<b>Bill To:</b>
Lotus Operating Co., LLC Lotus Exploration Co. 100 S. Main, STE 420 Wichita, KS 67202

Now Includes:



Customer ID	Field Ticket #	Payment Terms	
Lotus	59773	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	May 6, 2013	6/5/13

Quantity	Item	Description	Unit Price	Amount
		R M Sterling #6		
30.00	MAT	Class A Common	17.90	537.00
20.00	MAT	Pozmix	9.35	187.00
2.00	MAT	Gel	23.40	46.80
175.00	MAT	ASC	20.90	3,657.50
875.00	MAT	Kol Seal	0.98	857.50
43.75	MAT	Flo Seal	2.97	129.93
82.25	MAT	FL-160	18.90	1,554.52
277.82	SER	Cubic Feet	2.48	688.99
301.37	SER	Ton Mileage	2.60	783.57
1.00	SER	Production	2,810.84	2,810.84
25.00	SER	Pump Truck Mileage	7.70	192.50
1.00	SER	Manifold Head Rental	275.00	275.00
25.00	SER	Light Vehicle Mileage	4.40	110.00
1.00	EQP	5.5 Guide Shoe	280.80	280.80
1.00	EQP	5.5 AFU Insert	244.53	244.53
1.00	EQP	5.5 Basket	394.29	394.29
5.00	EQP	5.5 Centralizer	57.33	286.65
1.00	EQP	5.5 Rubber Plug	85.41	85.41
1.00	CEMENTER	Darin Franklin		
1.00	EQUIP OPER	Scott Priddy		

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

**\$ 2,624.57**

ONLY IF PAID ON OR BEFORE

**May 31, 2013**

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
<b>TOTAL</b>	<b>Continued</b>

59773

# ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D.# 20-5975204

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

SERVICE POINT:  
Medicine Lodge, KS

DATE <u>5/23/13</u>	SEC <u>35</u>	TWP <u>34S</u>	RANGE <u>13W</u>	CALLED OUT	ON LOCATION	JOB START <u>10:00am</u>	JOB FINISH <u>10:45am</u>
LEASE <u>Stevens</u>	WELL # <u>6</u>	LOCATION <u>Herdner, KS 2 1/2 West</u>	COUNTY <u>Barton</u>	STATE <u>KS</u>			
GLD OR (NEW) (Circle one)		<u>to Gyp Hill Rd, 2 hours, 4/1/13</u>					

CONTRACTOR Doyle #7  
 TYPE OF JOB Production  
 HOLE SIZE 7 7/8 T.D. 5600'  
 CASING SIZE 5 1/2 14 # DEPTH 5063'  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT 42'  
 CEMENT LEFT IN CSG.  
 PERFS.  
 DISPLACEMENT 126 bbls of freshwater

OWNER Loius Operating  
 CEMENT  
 AMOUNT ORDERED 50 Sx 60' 40' 40' 60'  
175 Sx Class A ASK #5# 10001  
.5% FL 160 + 4 1/2 # floccs  
 COMMON 30 Sx @ 17.90 537.00  
 POZMIX 20 Sx @ 9.35 187.00  
 GEL 2 Sx @ 23.40 46.80  
 CHLORIDE @  
 ASC 175 @ 20.90 3657.50  
Kolscol 875 @ .98 857.50  
Flu-scol 43.75 @ 2.92 129.93  
Fl-160 82.25 @ 18.90 1554.52  
 @  
 @  
 @  
 @  
 @  
 @  
 HANDLING 277.82 @ 2.48 688.99  
 MILEAGE 62.05/25/2.60 783.57  
 TOTAL 8442.81

EQUIPMENT  
 PUMP TRUCK CEMENTER Dgt. F  
558-555 HELPER Scott P  
 BULK TRUCK  
356-250 DRIVER Evan R  
 BULK TRUCK  
 DRIVER

REMARKS:

See Cement Log

SERVICE

DEPTH OF JOB 5063'  
 PUMP TRUCK CHARGE 2810.24  
 EXTRA FOOTAGE @  
 MILEAGE 25 @ 7.70 192.50  
 MANIFOLD Hees Rental @ 275.00  
LU 25 @ 4.40 110.00  
 @  
 TOTAL 3358.24

PLUG & FLOAT EQUIPMENT

5 1/2  
 1- Reg. Gumbo Shoe @ 280.80  
 1- BFW Insert @ 244.53  
 1- BFW Insert @ 394.29  
 5- Centrifigen @ 57.33 286.65  
 1- Rubber plug @ 85.41  
 TOTAL 1291.68

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.

PRINTED NAME X Doyle

SIGNATURE X [Signature]

Thank you!!!

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 13122.33  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS  
(Net) 10,498.26



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

August 26, 2013

Tim Hellman  
Lotus Operating Company, L.L.C.  
100 S MAIN STE 420  
WICHITA, KS 67202-3737

Re: ACO1  
API 15-007-24010-00-00  
RM Sterling 6  
NE/4 Sec.35-34S-13W  
Barber 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,  
Tim Hellman