



KANSAS CORPORATION COMMISSION 1156057
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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Bruce Oil Company, L.L.C.
Well Name	Bowen B 1
Doc ID	1156057

All Electric Logs Run

Sonic cement bong
Microresistivity
dual induction
dual compensated porosity

ALLIED OIL & GAS SERVICES, LLC

060458

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
G-ant B-nd

DATE <u>6-25-13</u>	SEC. <u>16</u>	TWP. <u>08S</u>	RANGE <u>14W</u>	CALLED OUT	ON LOCATION	JOB START <u>6:00 PM</u>	JOB FINISH <u>6:45 PM</u>
LEASE <u>Bowen</u>	WELL # <u>B1</u>		LOCATION <u>Nufom 627 4 North</u>		COUNTY <u>Osbourn</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>404 RD East 11 miles 16 North</u>				

CONTRACTOR Martin 24

TYPE OF JOB Production

HOLE SIZE 7 7/8 **T.D.**

CASING SIZE 5 1/2 **DEPTH** 2825.17

TUBING SIZE **DEPTH**

DRILL PIPE **DEPTH**

TOOL **DEPTH**

PRES. MAX 1100 **MINIMUM**

MEAS. LINE **SHOE JOINT** 11.17

CEMENT LEFT IN CSG. 11.17

PERFS.

DISPLACEMENT 66.97 BBLs

EQUIPMENT

PUMP TRUCK **CEMENTER** WASHC / SASH ^{Davis}

366 **HELPER** Kevin Eddy

BULK TRUCK

481 **DRIVER** Ben Newell

BULK TRUCK

**DRIVER**

OWNER

CEMENT

AMOUNT ORDERED 180 SX 60/40 + 2% Gel + 10% Salt + 5# Gilsomite Per SX

500 Gallon Super Flush

COMMON	<u>108</u>	@	<u>17.90</u>	<u>1,933.20</u>
POZMIX	<u>72</u>	@	<u>9.35</u>	<u>673.20</u>
GEL	<u>3</u>	@	<u>23.40</u>	<u>70.20</u>
CHLORIDE		@		
ASC		@		
Gilsomite	<u>900</u>	@	<u>98</u>	<u>882.00</u>
Salt	<u>800</u>	@	<u>26.35</u>	<u>210.80</u>
Super Flush	<u>500</u>	@	<u>1.27</u>	<u>635.00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>214.26</u>	@	<u>533.48</u>	<u>531.36</u>
MILEAGE	<u>8.74 X 52 X</u>	@	<u>2.60</u>	<u>1,181.40</u>
				TOTAL <u>6,117.40</u>

REMARKS:

on Job site had safety meeting
Spot Trucks Big and Bar float
Equi Drop Ball circulate Ball Thru
Raw 500 Gallon Super Flush
Plus Ret with 300X
Mix 180 SX 60/40 + 2% Gel + 10% Salt
+ 5# Gilsomite Wash Pump and lines
Start Displacement 66.97 BBLs
hand plugs set 1100 PS; Release and Hook

SERVICE

DEPTH OF JOB	<u>2825</u>		
PUMP TRUCK CHARGE	<u>2443.75</u>		
EXTRA FOOTAGE	@		
MILEAGE	<u>Hum 52</u>	@	<u>7.70</u> <u>400.40</u>
MANIFOLD	<u>Head manifold</u>	@	<u>275.00</u>
	<u>Hum 52</u>	@	<u>4.40</u> <u>228.80</u>
		@	

TOTAL 3,347.95

CHARGE TO: Bruce oil

STREET _____

CITY _____ **STATE** _____ **ZIP** _____

PLUG & FLOAT EQUIPMENT

hatch Down Battle	@	<u>324.09</u>	<u>324.09</u>
4 Basket	@	<u>394.24</u>	<u>1,576.28</u>
5 centrifuges	@	<u>57.33</u>	<u>286.65</u>
float shoe	@	<u>608.40</u>	<u>608.40</u>
	@		

TOTAL 2,796.10

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 Lonny Bruce

SIGNATURE Lonny Bruce

SALES TAX (If Any) _____

TOTAL CHARGES 12,261.45

DISCOUNT 3,065.36 **IF PAID IN 30 DAYS**

9,196.08

ALLIED OIL & GAS SERVICES, LLC 056630

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell Ks

Bowen B #1

DATE <u>6.22.13</u>	SEC <u>16</u>	TWP <u>8</u>	RANGE <u>14</u>	CALLED OUT	ON LOCATION	JOB START <u>1:45pm</u>	JOB FINISH <u>2:45pm</u>
LEASE <u>Between</u>	WELL # <u>B-41</u>	LOCATION				COUNTY <u>Osborne</u>	STATE <u>Ks</u>
OLD OR (NEW) (Circle one)							

CONTRACTOR Murphy #24

TYPE OF JOB Long Surface

HOLE SIZE 12 1/4 T.D.

CASING SIZE 8 5/8 DEPTH 710'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT 40.89

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 42.62 ⁵⁰⁰ ₁₁₂₀

OWNER

CEMENT AMOUNT ORDERED 400 SK

60/40 21.92 31.00

COMMON 240 SK @ 17.90 \$ 4,296.00

POZMIX 160 SK @ 9.35 \$ 1,496.00

GEL 7 SK @ 23.10 \$ 163.80

CHLORIDE 13 SK @ 64.00 \$ 832.00

ASC @

HANDLING 270.11 @ 2.48 \$ 669.86

MILEAGE 631.80 2.60 \$ 1,642.68

TOTAL \$ 9,100.34

EQUIPMENT

PUMP TRUCK CEMENTER Tony P

409 HELPER Nathan D

BULK TRUCK

473 DRIVER Danny S.

BULK TRUCK

DRIVER

REMARKS:

* Ran Float Equipment - See equipment

* Circulated cement to surface =
Ran cement @ 400 SK - 1st 154
@ 13.5 = 100 SK - Ran 300 SK
@ 45.71 ⁵⁰⁰ ₁₁₂₀

* Displaced 8 5/8 Top Rubber Plug
@ 42.62 ⁵⁰⁰ ₁₁₂₀ - Landed plug @ 800psi

CHARGE TO: Bruce Oil

STREET

CITY STATE ZIP

SERVICE

DEPTH OF JOB 710'

PUMP TRUCK CHARGE \$ 1,52.25

EXTRA FOOTAGE @

MILEAGE Heavy 52m @ 7.70 \$ 400.40

MANIFOLD Light 52m @ 4.40 \$ 228.80

TOTAL \$ 2,191.45

PLUG & FLOAT EQUIPMENT

1 X 8 5/8 Top Rubber Plug @ 76.25

1 X 8 5/8 Baffle Plate @ 67.50

1 X 8 5/8 Basket @ 221.50

3 X 8 5/8 central @ 37.50 \$ 112.50

TOTAL ~~112.50~~
\$ 482.75

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 Anthony Martin

SIGNATURE Anthony Martin

SALES TAX (If Any)

TOTAL CHARGES 11,724.54

DISCOUNT 3,048.98 IF PAID IN 30 DAYS

8676.16 net before tax