



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1158116  
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: \_\_\_\_\_

1158116

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 <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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# ALLIED OIL & GAS SERVICES, LLC 061133

Federal Tax I.D. # 20-8651476

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

SERVICE POINT: Daldy KS

DATE <u>9/20/13</u>	SEC <u>12</u>	TWP. <u>2</u>	RANGE <u>3-10</u>	CALLED OUT	ON LOCATION <u>1:45 p.m.</u>	JOB START <u>6:00</u>	JOB FINISH <u>6:30 10:00</u>
LEASE <u>J-Kyle</u>	WELL# <u>3-12</u>	LOCATION <u>Oberlin SW 5N1W Sinto</u>	COUNTY <u>Dickens</u>	STATE <u>KS</u>			
OLD OR NEW (Circle one)							

CONTRACTOR WW-6  
 TYPE OF JOB Production 5 1/2 (2 stage)  
 HOLE SIZE 7 7/8 TD. 3910  
 CASING SIZE 5 1/2 DEPTH 3898.93  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DV tool DEPTH 2453  
 PRES. MAX MINIMUM  
 MEAS. LNB SHOES JOINT 21.16  
 CEMENT LEFT IN CSO. 21.16  
 PERFS.  
 DISPLACEMENT Bottom

OWNER Salnt  
 CEMENT  
 AMOUNT ORDERED 150 sks ASC 10% salt  
2 logel 5" Gilsomite  
530 sks Lite 1/4# Flo-seal  
 COMMON \_\_\_\_\_  
 POZMIX \_\_\_\_\_  
 GBL 36.46 sks @ 23.40 853.16  
 CHLORIDE \_\_\_\_\_  
 ASC 150 sks @ 20.90 3135.00  
Lite 530 sks @ 15.95 8453.85  
Gilsomite 750# @ .98 735.00  
Flo-seal 132.50# @ 2.97 393.53  
Salt 15 sks @ 24.35 365.25  
 12 Bil super flush @ 58.70 704.40  
 HANDLING 791.1443 @ 2.48 1962.03  
 MILBAGE 31.47 mi @ 2.10 5763.94  
 TOTAL 21,734.31

EQUIPMENT  
 PUMP TRUCK CEMENTER Phil Beaver/Ankerford  
 # 120 HELPER Tyler Elipse  
 BULK TRUCK # 366 DRIVER Brandon W. McKinson  
 BULK TRUCK # 600 DRIVER Chris Helmingstein

REMARKS:  
pump 12 bil super flush mix 150 sks  
asc release plug, washup truck  
displace with water/mud plug did not land  
Flood did hold. Drop dart tool opened at  
800' circulate 2 hrs mix 30 sks in PH.  
mix 500 sks washup pump & lines displace  
with water plug landed 1800' lift pressure  
cement did circulate

SERVICE  
 DEPTH OF JOB 2556.75 3898.93'  
 PUMP TRUCK CHAROB 2556.75 2443.75  
 EXTRA FOOTAGE \_\_\_\_\_  
 MILBAGE MIL HV 70 @ 7.70 539.00  
 MANIFOLD Head @ 275.00  
MIL V 70 @ 4.40 308.00

CHARGE TO: Cholla Production LLC  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 6124.50

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  
5 1/2 Weatherford  
 DV tool 1 @ 5335.24  
 centralizers 5 @ 57.33 286.65  
 Baskets 3 @ 394.29 1182.87  
 scratchers 10 @ 88.92 889.20  
 guide shoe 1 @ 280.80 280.80  
 AFU insert 1 334.62  
 TOTAL 8,309.40

PRINTED NAME John Mondoro  
 SIGNATURE John J Mondoro

SALES TAX (if Any) \_\_\_\_\_  
 TOTAL CHARGES 36,168.21  
 DISCOUNT 7,233.64 IF PAID IN 30 DAYS  
28,934.56 Net.

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/>

Shari Feist Albrecht, Chair  
Thomas E. Wright, Commissioner  
Mark Sievers, Commissioner

Sam Brownback, Governor

January 21, 2014

Emily Hundley-Goff  
Cholla Production, LLC  
10390 BRADFORD RD.  
SUITE 201  
LITTLETON, CO 80127

Re: ACO-1  
API 15-039-20828-00-01  
J.Kyte 3-12  
NW/4 Sec.12-02S-30W  
Decatur County, Kansas

Dear Emily Hundley-Goff:

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 09/17/2013 and the ACO-1 was received on January 16, 2014 (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