

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1157056

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 #			API No. 15			
Name:			Spot Description:			
Address 1:			Sec	TwpS. R	West	
Address 2:			Feet	from North / South Line of	f Section	
City: Sta	ate: Zip	D:+	Feet	from East / West Line o	f Section	
Contact Person:			Footages Calculated from Ne	arest Outside Section Corner:		
Phone: ()			□ NE □ NW	□ SE □ SW		
CONTRACTOR: License #			GPS Location: Lat:	, Long:		
Name:				i. xx.xxxxx) (e.gxxx.xx	xxx)	
Wellsite Geologist:			Datum: NAD27 N			
Purchaser:			County:			
Designate Type of Completion:			Lease Name: Well #: Field Name:			
New Well Re-	Entry	Workover				
	_		Producing Formation:			
☐ Oil ☐ WSW	SWD ENHR GSW	☐ SIGW☐ Temp. Abd.	Elevation: Ground:	Kelly Bushing:		
☐ Gas ☐ D&A ☐ OG			Total Vertical Depth:	Plug Back Total Depth:		
CM (Coal Bed Methane)	G3W	Terrip. Abd.	Amount of Surface Pipe Set a	and Cemented at:	Feet	
Cathodic Other (Core	Expl etc.)		Multiple Stage Cementing Co			
If Workover/Re-entry: Old Well Info					Feet	
Operator:				nent circulated from:		
Well Name:			,	w/	sx cmt	
Original Comp. Date:			loot doparto.		_ 0x 01111	
<u> </u>	_	NHR Conv. to SWD				
Deepening Re-perf. Plug Back	Conv. to GS		Drilling Fluid Management I (Data must be collected from the			
Commingled	Permit #:		Chloride content:	ppm Fluid volume:	bbls	
Dual Completion Permit #:			Dewatering method used:			
			Location of fluid disposal if ha	uled offsite:		
☐ ENHR	Permit #:		On a water Manage			
GSW	Permit #:			L'anna II		
				License #:		
Spud Date or Date Reached TD Completion Date or				TwpS. R		
Recompletion Date Recompletion Date		Recompletion Date	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:					

Page Two



Operator Name:				_ Lease I	Name: _			Well #:	
Sec Twp	S. R	East	West	County	:				
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in press o surface test, along v	ures, whe	ther shut-in pre chart(s). Attach	ssure reac extra shee	hed stati	c level, hydrosta space is neede	tic pressures, b	ottom hole temp	erature, fluid recov
Final Radioactivity Lo files must be submitted						ogs must be ema	liled to kcc-well-	logs@kcc.ks.go	v. Digital electronic
Drill Stem Tests Taker (Attach Additional		Y	es No			J	on (Top), Depth		Sample
Samples Sent to Geo	logical Survey	Y	es No		Nam	е		Тор	Datum
Cores Taken Yes Electric Log Run Yes									
List All E. Logs Run:									
				RECORD	Ne				
	0: 11.1					ermediate, product		" 0 1	T 15
Purpose of String	Size Hole Drilled		ze Casing t (In O.D.)	Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and Percer Additives
			ADDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD			
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used		Type and	Percent Additives	
Perforate Protect Casing	Top Dottom								
Plug Back TD Plug Off Zone									
1 lug 011 20110									
Did you perform a hydrau	ulic fracturing treatment	on this well	?			Yes	No (If No, s	skip questions 2 a	nd 3)
Does the volume of the t			-		-		_ ` `	skip question 3)	
Was the hydraulic fractur	ing treatment informatio	n submitted	to the chemical of	disclosure re	gistry?	Yes	No (If No, 1	ill 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 (Amount and Kind of Material Used) Depth					
Specify Poolage of Each Interval Periorated					(* *			200	
TUBING RECORD:	Size:	Set At:		Packer A	t·	Liner Run:			
		0017111				[Yes N	o	
Date of First, Resumed	Production, SWD or EN	HR.	Producing Meth	nod:	g 🗌	Gas Lift (Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	er B	bls.	Gas-Oil Ratio	Gravity
DIODOCITI	01.05.040			4ETUOD 05	. 00145/	TION:		DDOD! ICT!	
DISPOSITION Solo	ON OF GAS: Used on Lease		N Open Hole	∥ETHOD OF Perf.			nmingled	PRODUCTION	ON INTERVAL:
	bmit ACO-18.)		Other (Specify)		(Submit		mit ACO-4)		

ALLIED OIL & GAS SERVICES, LLC 054757 Federal Tax I.D.# 20-5975804

REMIT TO P.O. E	BOX 31 ELL, KANSAS 670		1 14X 1.D.# 20-5975804	100 market		
-	leno.			SER	VICE POINT:	11 KS
DATE 7-26-13	6 14	RANGE //	CALLED OUT	ON LOCATION	JOB START 2:30AM	JOB FINIS
LEASE Daron	WELL# 1-6	LOCATION DO	Prance KS IN	/ 1. 1.15	COUNTY	
OLD OR NEW Cir	cle one)	Einto	THE IS IN	IWIS	COUNTY RUSSE //	STATE
CONTRACTOR	ova/ 42	- 1110	•		J	
TYPE OF JOB	face		OWNER			
HOLE SIZE 12 7 CASING SIZE 85	T.D.	472	CEMENT			
TUBING SIZE	DLI	TH 475	AMOUNT ORD	ERED 300	c- 29	
DRILL PIPE	DEP DEP	The state of the s		000	com 3/c	rec
TOOL PRES. MAX	DEP					
MEAS. LINE		IMUM	COMMON_	200	0176	
CEMENT LEFT IN O	CSG. 15	EJOINT 15	POZMIX	300	@17.90	5370.0
PERFS.			GEL		@	
DISPLACEMENT	7	9/4 661	CHLORIDE _ ASC	10	@64.00	640.0
	EQUIPMENT				@	
PUMP TRUCK CE	1		-		@ @	
	MENTER Robe	+ 1	_	The state of the s	@	
BULK TRUCK	LPER Woody	0		-	9	
# 481 DR	IVER Joc G				<u> </u>	
" TROCK	Ø/ (0)				9	
DK	IVER		HANDLING 3/4	11003	And the second s	
			MILEAGE 145.	00 +	2.48	779.18
ca. 11 145 C	REMARKS:			.//-/		377.00
can lits of circulation m	8 /8 23# 0	sq recieve	-		TOTAL Z	166.18
displace 29%	4 661 shut	157000	-	SERVICE	l is	
coment die	TO SHARE THE SHA		DEPTH OF JOB		//2=	
VI. 8	C.rcul.	ate to surf	SEC PUMP TRUCK CH	ARGR	472 1512	25
			 EXTRA FOOTAGE 			20
	****		MILEAGE 10 H		7.70 7	7.00
6)		Thank	10 1	UMI @	4.40 4	
CHARGE TO: Qua,	10.1.	104		@	1.10 4	4.00
				-		_
					TOTAL 16	33,25
CITY	STATE	_ZIP				
			PLUG	& FLOAT EQ	DIPMENT	
		#				
	4 9					
To: Allied Oil & Gas Se	rvices, LLC.	727				
ou are nereby requeste	d to rent cementin	g equipment				
and retribility combiner an	(i helper(e) to acci-	at access				
STATE OF TO GO WOLK BS	15 listed The abo					
one to satisfaction and ontractor. I have read a	and inderetand the	ner agent or			TOTAL	
ERMS AND CONDIT	IONS" listed on th	GENERAL	SALES TAX (If Any).			
1	·	c reverse side.	TOTAL CHARGES			
RINTED NAME TO	M Plat	16.				
10	1	-	DISCOUNT 2/99		IF PAID IN 3	0 DAYS
GNATURE TANA	1 8620	,	yet 6599.	5/	e#	50
	1 1000		220			
				16		
L. T. and Maria	•			,	8 a	

No. 2320 P. 2

THANK YOU

CEMENTING LOG

STAGE NO.

77 70	12	Rysu	00	cket No. 456	ana (CEMENT DATA:
Date 7,30.	15 Distric			cket No. 130	2	Specer Type:
	100 con			/ell No. \~\	1-2	
	Russin			41-		-01/on
A	Solverce			eld		
	Of push	1-20	exit	12 B	W Sint	LEAD: Pump Timehrs. Type
CASING DATA:	Conductor					Amt Skş Yield PPG
	Surface	ac 50)	-			TAIL: Pump Timehrs. Type
Size				Collar	-	Excess
						Amt Sks Yield ft ³ /sk Density PPG
	72		46			WATER; Lead gals/sk Toil gals/sk Total Bbls.
	- Hab		.0.	B 33	20,	500,
Casing Depths: To	-7 -44		Bottom			Pump Trucks Used 4408 - DALKE
***************************************				and the second s		Rule Fourie
	in the second process of the second					# 610- 700in
Drill Pipe: Size		Weight		Collars		
Open Hole: Size _		877.0				Float Equip: Manufacturer
CAPACITY FACTO						Shoe: Type Depth
Casing	Bbls/Lin. ft		Lin. ft./E	IPI 'OIMS	3	Float: Type Depth
Open Holes:				lbl		Centralizars: Quantity Plugs Top Btm
Drill Pipe:	Bbls/Lin. ft		Lin. ft./E	lol		Stage Collers
Annulus:		nagene arthur transce				Special Equip.
	Bbls/Lin. ft	0-000-	Lin. ft/E	101 10548	32 1	Disp. Fluid Type Amt Bbls. Weight PPG
Perforations: F	rom	ft. 10.		ft. Amt		Mud Type Weight PPG
COMPANY REPR	ESENTATIVE					CEMENTER 75- P
TIME	PRESSU			JID PUMPED I		REMARKS
AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	Bbls Min,	
A DUO PM						On location - algod up
9						3.
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					 	Treas - medicine ludge - physpel
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-	-			 		Dir 5.96 2000
					 	Des Pret & 1110/2 18 11/24
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				 	 	Fill could to Surfey
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						01 - 50 103 - 15 11 211 511
						60= Worse Hyle= 120 - 5.40 20
· · · · · · · · · · · · · · · · · · ·						Direct down
						-011
		3.00				

FINAL DISP. PRESS: _______ PSI BUMP PLUG TO ______ PSI BLEEDBACK ______ BBLS.

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/

Sam Brownback, Governor

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

October 07, 2013

Daron Patterson Quail Oil & Gas, LC 525 INDUSTRIAL DR. PO BOX K GARDEN CITY, KS 67846-9643

Re: ACO1 API 15-167-23895-00-00 Daron 1-6 SW/4 Sec.06-14S-11W

Russell 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,
Daron Patterson

GENERAL INFORMATION

Client Information:

Company: QUAIL OIL+GAS

Contact: DARON PATTERSON

Phone: Fax: e-mail:

Site Information:

Contact: DAVE BARGER

Phone: Fax: e-mail:

Well Information:

Name: DARON 1-6

Operator: QUAIL OIL+GAS

Location-Downhole:

Location-Surface: S6/14S/11W

Test Information:

Company:

Representative:

Supervisor:

Test Type: DST #1 CONVENTIONAL Job Number:

Test Unit:

Start Date: 2013/07/29 Start Time: 02:00:00

End Date: 2013/07/29 End Time: 08:30:00

Report Date: Prepared By:

Remarks: Qualified By:

RECOVERY: 20' DRILLING MUD

WHEN TOOL INITIALLY OPENED, SLID 10' TO GET IT ON BOTTOM.



P.O. Box 157

HOISINGTON, KANSAS 67544 (800) 542-7313

DRILL-STEM TEST TICKET

FILE: STC/Daron1-6dst1

TIME ON: 02:00 07/29/13

TIME OFF: 08:30 07/29\13

Company QUAIL OIL+GAS	Lease & Well No. DARON 1-6					
Contractor ROYAL DRLG RIG2	Charge to QUAILOIL+GAS					
Elevation1738 G.LFormationLANSI	NG Effective PayFt. Ticket NoD1343					
Date 7/29/13 Sec. 6 Twp. 14 S	Range11 W CountyRUSSELLState_KANSAS					
Test Approved By DAVE BARKER	Diamond RepresentativeJOHN RIEDL					
Formation Test No. 1 Interval Tested from 2	2899 ft. to 2915 ft. Total Depth 2915 ft.					
Packer Depth ft. Size 6 3/4 in.	Packer depthft. Size6 3/4in.					
Packer Depth 2899 ft. Size 6 3/4 in.	Packer depthft. Size6 3/4in.					
Depth of Selective Zone Set						
Top Recorder Depth (Inside)ft.	Recorder Number30046 Cap6000 P.S.I.					
Bottom Recorder Depth (Outside)ft.	Recorder Number 11073 Cap. 4000 P.S.I.					
Below Straddle Recorder Depthft.	Recorder NumberCapP.S.I.					
Mud Type CHEMICAL Viscosity 47	Drill Collar Length 0 ft. I.D. 2 1/4 in					
Weight 9 Water Loss 8 c	c. Weight Pipe Length0 ft. I.D2 7/8 ir					
Chlorides 4900 P.P.M.	Drill Pipe Length 2873 ft. I.D 3 1/2 in					
Jars: Make STERLING Serial Number #2	Test Tool Length 26 ft. Tool Size 3 1/2-IF in					
Did Well Flow? NO Reversed Out NO	Anchor Length 16 ft. Size 4 1/2-FH in					
The second secon	Surface Choke Size 1 in. Bottom Choke Size 5/8 in					
Blow: 1st Open: WEAK (1" DECREASING + DEAD IN	N 14 MIN.)					
^{2nd Open:} NO BLOW; FLUSHED TOOL AND HAI) WEAK SURGE					
Recovered 20 ft. of DRILLING MUD						
Recoveredft. of						
Recoveredft. of						
Recoveredft. of						
Recoveredft. of	pose control worth					
Recoveredft. of	Other Charges					
Remarks: TOTAL FLUID RECOVERY:20' IN DRILL PIPE	Insurance					
TOOL SAMPLE GRINDOUT: 100% MUD						
	Total					
Time Set Packer(s) 5:15 A.M P.M. Time Started Off E	Rottom 7:15 P.M P.M. Maximum Temperature 100					
Initial Hydrostatic Pressure	(A) 1412 P.S.I.					
Initial Flow Period	(B) 25 P.S.I. to (C) 28 P.S.I.					
Initial Closed In Period	(D)898 P.S.I.					
Final Flow Period	(E)27 P.S.I. to (F)27 P.S.I.					
Final Closed In PeriodMinutes60	(G) 923 P.S.I.					
Final Hydrostatic Pressure	(H) 1386 _{P.S.I.}					

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

QUAIL OIL+GAS Start Test Date: 2013/07/29 Final Test Date: 2013/07/29 DARON 1-6 Formation: LANSING





