

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1157786

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:	SecTwpS. R
Address 2:	Feet from
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
□ Oil □ WSW □ SHOW □ 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:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
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 #:	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:
☐ ENHR Permit #: ☐ GSW Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	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 Approved by: Date:		



Page Two Operator Name: Lease Name: _ _ Well #: _ 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** No Loa Formation (Top), Depth and Datum Sample | Yes (Attach Additional Sheets) Name Top Datum No Samples Sent to Geological Survey Yes ☐ No Yes
 Yes
 ■
 Yes
 ■
 Yes
 ■
 Nes
 Nes Cores Taken Electric Log Run ___ Yes No List All E. Logs Run: CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight Setting Type of # Sacks Type and Percent Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Depth Cement Used Additives ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone Did you perform a hydraulic fracturing treatment on this well? Yes No (If No, skip questions 2 and 3) No Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes (If No, skip question 3) Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? (If No, fill out Page Three of the ACO-1) Yes PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated Depth (Amount and Kind of Material Used) 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** Oil Bbls Gas Mcf Water Bbls. Gas-Oil Ratio Gravity Per 24 Hours METHOD OF COMPLETION: DISPOSITION OF GAS: PRODUCTION INTERVAL:

Dually Comp.

(Submit ACO-5)

Commingled

(Submit ACO-4)

Perf.

Open Hole

Other (Specify)

Vented

Sold

(If vented, Submit ACO-18.)

Used on Lease



Cholla Production, LLC.

12-2s-30w Decatur Co, KS

10390 Bradford RD Suite 201 Littleton CO, 80127

J. Kyte 2-12 Job Ticket: 52965

Tester:

Unit No:

DST#: 1

ATTN: Clayton Erickson

Test Start: 2013.09.09 @ 22:55:00

Jace McKinney

GENERAL INFORMATION:

Lansing " A " Formation:

Deviated: Whipstock: Test Type: Conventional Bottom Hole (Initial) ft (KB)

Time Tool Opened: 00:56:15 Time Test Ended: 05:51:15

Interval:

3734.00 ft (KB) To 3800.00 ft (KB) (TVD) Reference Elevations: 2797.00 ft (KB)

Total Depth: 3800.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Poor

KB to GR/CF: 5.00 ft

2792.00 ft (CF)

Serial #: 8675 Inside

Press@RunDepth: 3735.00 ft (KB) 168.56 psig @ Capacity: 8000.00 psig

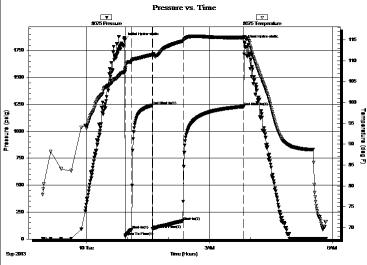
Start Date: 2013.09.09 End Date: 2013.09.10 Last Calib.: 2013.09.10 Start Time: 22:55:15 End Time: 05:51:15 Time On Btm: 2013.09.10 @ 00:55:45 Time Off Btm: 2013.09.10 @ 03:51:15

TEST COMMENT: Built to 5 1/2" blow

Bled off for 2 min. No return blow

B.O.B. in 27 min.

Bled off for 5 min. No return blow



		PI	RESSUR	RE SUMMARY
Ī	Time	Pressure	Temp	Annotation
	(Min.)	(psig)	(deg F)	
	0	1848.70	107.65	Initial Hydro-static
	1	28.44	107.29	Open To Flow (1)
	11	89.00	109.92	Shut-In(1)
	40	1240.31	111.41	End Shut-In(1)
3	41	93.44	111.00	Open To Flow (2)
Temperature (deg F	86	168.56	114.66	Shut-In(2)
â	175	1229.26	115.51	End Shut-In(2)
J	176	1826.21	115.65	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
122.00	mcw with oil scum 30%M 70%W	0.60
198.00	mcw with oil scum 50%M 50%W	2.77
-	ļ	+ + +

Gas Rates		es	
	Choko (inchos)	Proceuro (peig)	Gas Pato (Mof/d)

Trilobite Testing, Inc Ref. No: 52965 Printed: 2013.09.10 @ 06:14:36



FLUID SUMMARY

Cholla Production, LLC.

12-2s-30w Decatur Co, KS

10390 Bradford RD Suite 201

Littleton CO, 80127

J. Kyte 2-12

Job Ticket: 52965

DST#: 1

ATTN: Clayton Erickson

Test Start: 2013.09.09 @ 22:55:00

Mud and Cushion Information

Mud Type:Gel ChemCushion Type:Oil A Pl:deg A PlMud Weight:9.00 lb/galCushion Length:ftWater Salinity:ppm

Mud Weight: 9.00 lb/gal Cushion Length: ft
Viscosity: 57.00 sec/qt Cushion Volume: bbl

6.80 in³ Gas Cushion Type:

Resistivity: ohm.m Gas Cushion Pressure: psig

Salinity: 600.00 ppm Filter Cake: 1.00 inches

Recovery Information

Water Loss:

Recovery Table

Length ft	Description	Volume bbl
122.00	mcw with oil scum 30%M 70%W	0.600
198.00	mcw with oil scum 50%M 50%W	2.775

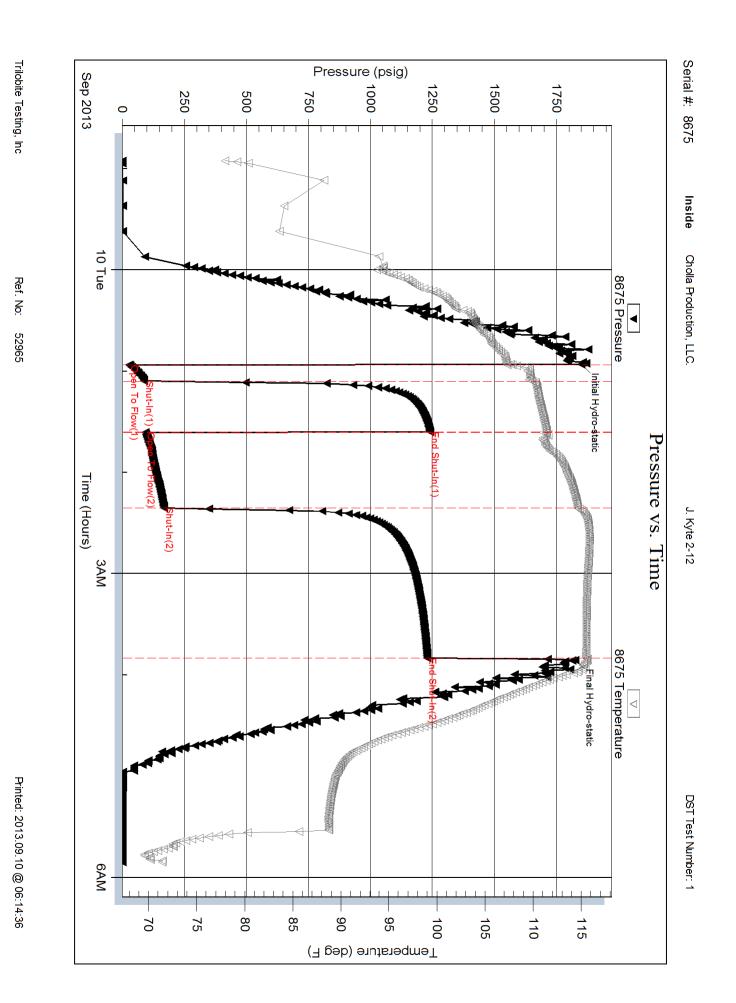
Total Length: 320.00 ft Total Volume: 3.375 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments: RW: .08 @ 70 F = 80,000

Trilobite Testing, Inc Ref. No: 52965 Printed: 2013.09.10 @ 06:14:36





Cholla Production, LLC.

12-2s-30w Decatur Co, KS

10390 Bradford RD Suite 201

Littleton CO, 80127

Job Ticket: 52966

J. Kyte 2-12

Tester:

ATTN: Clayton Erickson

Test Start: 2013.09.10 @ 13:00:00

GENERAL INFORMATION:

Formation: Lansing " B "

Deviated: No Whipstock: ft (KB) Test Type: Conventional Bottom Hole (Reset)

Time Tool Opened: 14:58:15 Time Test Ended: 19:05:00

Interval:

d: 19:05:00 Unit No: 46 3796.00 ft (KB) To 3840.00 ft (KB) (TVD) Reference Eleva

Total Depth: 3840.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Poor

Reference Elevations: 2797.00 ft (KB)

Jace McKinney

KB to GR/CF: 5.00 ft

DST#: 2

2792.00 ft (CF)

Serial #: 8675 Inside

Press@RunDepth: 26.81 psig @ 3797.00 ft (KB) Capacity: 8000.00 psig

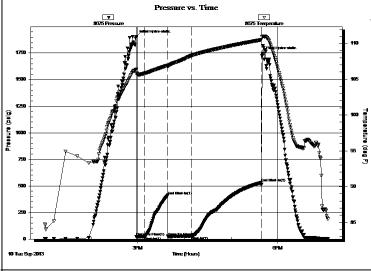
 Start Date:
 2013.09.10
 End Date:
 2013.09.10
 Last Calib.:
 2013.09.10

 Start Time:
 13:00:15
 End Time:
 19:05:00
 Time On Btm:
 2013.09.10 @ 14:58:00

 Time Off Btm:
 2013.09.10 @ 17:40:45

TEST COMMENT: Weak surface blow

No return blow No blow No return blow



	PRESSURE SUMMARY			
Tim	ne	Pressure	Temp	Annotation
(Mir	າ.)	(psig)	(deg F)	
	0	1899.97	106.40	Initial Hydro-static
	1	21.53	105.73	Open To Flow (1)
	11	22.64	105.80	Shut-In(1)
	41	410.95	106.92	End Shut-In(1)
	41	24.06	106.74	Open To Flow (2)
	71	26.81	108.28	Shut-In(2)
	161	530.12	110.49	End Shut-In(2)
	163	1742.02	110.98	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)		
5.00	100% Mud	0.02		
* Recovery from multiple tests				

Gas Rates		
Chalco (inabas)	Drocoure (poig)	Coo Boto (Mof/d)

Trilobite Testing, Inc Ref. No: 52966 Printed: 2013.09.10 @ 21:59:01



Cholla Production, LLC.

12-2s-30w Decatur Co, KS

10390 Bradford RD Suite 201

Littleton CO, 80127

J. Kyte 2-12Job Ticket: 52966

Tester:

Unit No:

DST#: 2

2792.00 ft (CF)

ATTN: Clayton Erickson

Test Start: 2013.09.10 @ 13:00:00

Jace McKinney

GENERAL INFORMATION:

Formation: Lansing " B "

Deviated: No Whipstock: ft (KB) Test Type: Conventional Bottom Hole (Reset)

Time Tool Opened: 14:58:15 Time Test Ended: 19:05:00

Interval: 3796.00 ft (KB) To 3840.00 ft (KB) (TVD) Reference Elevations: 2797.00 ft (KB)

Total Depth: 3840.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Poor KB to GR/CF: 5.00 ft

Serial #: 8650 Outside

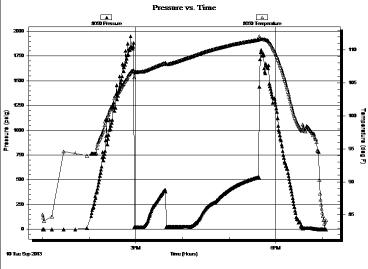
 Press@RunDepth:
 psig
 @ 3797.00 ft (KB)
 Capacity:
 8000.00 psig

Start Date: 2013.09.10 End Date: 2013.09.10 Last Calib.: 2013.09.10

Start Time: 13:00:15 End Time: 19:04:45 Time On Btm: Time Off Btm:

TEST COMMENT: Weak surface blow

No return blow No blow No return blow



PRESSURE S	SUMMARY
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	Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
•				
,				

Recovery

Length (ft)	Description	Volume (bbl)		
5.00	100% Mud	0.02		
* Recovery from multiple tests				

Gas Rates

Choke (inches) Pressure (psig) Gas Rate (Mcf/d)

Trilobite Testing, Inc Ref. No: 52966 Printed: 2013.09.10 @ 21:59:01



FLUID SUMMARY

Cholla Production, LLC.

12-2s-30w Decatur Co, KS

10390 Bradford RD Suite 201

Littleton CO, 80127

J. Kyte 2-12

Job Ticket: 52966

Serial #:

DST#: 2

ATTN: Clayton Erickson

Test Start: 2013.09.10 @ 13:00:00

Mud and Cushion Information

Mud Type:Gel ChemCushion Type:Oil A Pl:deg A PlMud Weight:9.00 lb/galCushion Length:ftWater Salinity:ppm

Viscosity: 58.00 sec/qt Cushion Volume: bbl

Water Loss: 7.40 in³ Gas Cushion Type:

Resistivity: ohm.m Gas Cushion Pressure: psig

Salinity: 900.00 ppm Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	100% Mud	0.025

Total Length: 5.00 ft Total Volume: 0.025 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0

Laboratory Name: Laboratory Location:

Recovery Comments:

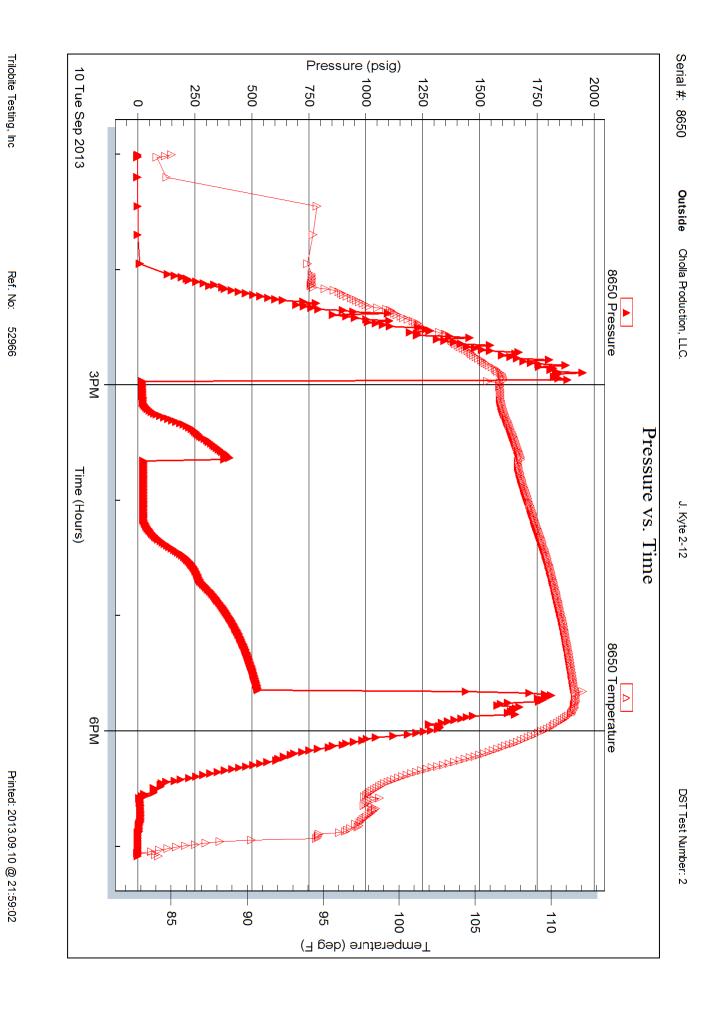
Trilobite Testing, Inc Ref. No: 52966 Printed: 2013.09.10 @ 21:59:02

Trilobite Testing, Inc

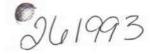
Ref. No:

52966

Printed: 2013.09.10 @ 21:59:02







TICKE, NUME	BER 44302
LOCATION_	Oakley KS
FOREMAN	1020H Dukal

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER# WELL NAME & NUMBER				SECTION	TOWNSHIP	P RANGE COUNT	
9-6-13	2582	J. Kuto	2-12		12	25	300	Decetur
USTOMER	11 5	1 ;		Obolin				PECETUR
AILING ADDR	ESS Frod	oction)	10	5W	TITOOK #	DRIVER	TRUCK#	DRIVER
MENTO ADDIT	200				456-T118	Dave		
ITY	Ic	TATE	7ID 0005	5 N	460	Cary D	auis .	
IA A	5	STATE	ZIP CODE	14 W		Justin J	bluson	Rider
OR TYPE &	<i>E</i>		21/	HOLE DEPTH	0/10			
ASING DEPTH			21/4		1_260_	CASING SIZE & I	WEIGHT	*
LURRY WEIGH	7	RILL PIPE		_TUBING			OTHER	- /
ISPLACEMEN'		ISPLACEMENT	DOI	WATER gal/s	ik	CEMENT LEFT IN	CASING_/5	- 26'
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La L	a Fety Me	eting	Kig up	on Wi	118,0	I'm Casung	on botto	ca
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ACCOUNT	QUANITY or	LIMITS	6.	CODIDTION	OFFINARE		+Crew	
CODE	QUANTITO	UNIIS	DE	SCRIPTION of	SERVICES or PR	ODUCT	UNIT PRICE	TOTAL
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706	50		MILEAGE					
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THORIZTION	John 7	Honde	m	Li	. Cump	1010日		

account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



262305

LOCATION Oakley Ko.
FOREMAN Darcen Pacette

	FIELD TIQUET & TOP ATMENT DEDORT
PO Box 884, Chanute, KS 66720	FIELD TICKET & TREATMENT REPORT
620-431-9210 or 800-467-8676	CEMENT

620-431-9210 or 800-467-867	76	CEMENT				KE.
DATE CUSTOMER#	WELL NAME & NUM	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/12/13 2582	Jikute 2-1	12	12	25	30 w	Decatur
CUSTOMER P. J.	etion icc	Oberlin	TOUGH #	DOM STO		
MAILING ADDRESS	tion LLC	5w	TRUCK#	DRIVER	TRUCK#	DRIVER
INALING ADDITION		5 N	463	Cory		
			466	Jermey S.		
CITY	STATE ZIP CODE	Perw				
		1/2W				
JOB TYPE PTA	HOLE SIZE 7 1/8	HOLE DEPTH		CASING SIZE & W	EIGHT	
CASING DEPTH	DRILL PIPE 41/2	TUBING			OTHER	
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk		CEMENT LEFT In (CASING	
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI		RATE		
REMARKS: Safty M			-8	Plug as C	2000	7
REMARKS: SUTTY III	by Mig up	or ww	CC A	1149 45 (11 WELLE	7
2560'- 255						
1864- 1003	KS	- /	7 7 7	// 45/	- 1	
310' - 405	Ks (2055Ks 60	2/40 4	6 Gel	14 # F/o:	seal)	
40' - 105	K5			37.7.5		
Plug Pothole	305Ks					
, , , , , , , , , , , , , , , , , , , ,						

CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
405 N	1	PUMP CHARGE		
5406	50	MILEAGE	-	
5407	8.82	Ton Mileage Delivery		
1131	205 6Ks.	colus Poz mix		
118B	705	Bentonite		
1107	514	Flosen/		
4432	1	85/8 Wooden Plug	4	
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	14.	7,15%		
3737	200			
THORIZTION_/	Mike Steen	TILE TITLE		

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

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

September 18, 2013

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

Re: ACO1 API 15-039-21188-00-00 J. Kyte 2-12 NE/4 Sec.12-02S-30W Decatur 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, Emily Hundley-Goff