



KANSAS CORPORATION COMMISSION 1161537
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 Bbbs.	Gas Mcf	Water Bbbs.	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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Abundant Oil Company, A General Partnership
Well Name	Marcotte 3
Doc ID	1161537

Tops

Name	Top	Datum
Andydrite	1506	+667
Topeka	3085	-912
Heebner	3295	-1122
Toronto	3315	-1142
Lansing	3336	-1163
BKC	3553	-1380
Arbuckle	3577	-1404
TD	3654	-1481

MUD LOG
WellSight Systems
Scale 1:240 (5"=100') Imperial
Measured Depth Log

Well Name: **MARCOTTE #3**
Location: **660'FNL & 400' FEL: Sec. 20 ;Twnsp. 9s.; Rge. 18w.**
License Number: **34795** Region: **Rooks County, KS**
Spud Date: **9-21-2013** Drilling Completed: **9-27-13**
Surface Coordinates: **W/2 E/2 NE NE**
700' FNL & 400' FEL
Bottom Hole Coordinates:
Ground Elevation (ft): **2167** K.B. Elevation (ft): **2173**
Logged Interval (ft): **2800** To: **3654** Total Depth (ft): **RTD 3657**
Formation: **Arbuckle**
Type of Drilling Fluid: **Chemical**

Printed by MUD.LOG from WellSight Systems 1-800-447-1534 www.WellSight.com

OPERATOR

Company: **ABUNDANT OIL PARTNERSHIP**
Address: **P.O. Box 2216**
Grand Island, NE 68802

GEOLOGIST

Name: **Mike Bair**
Company: **Abundant Oil Partnership**
Address: **Longmont, CO.**

FORMATION TOPS

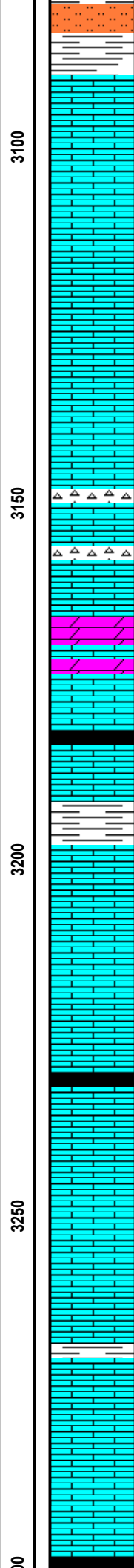
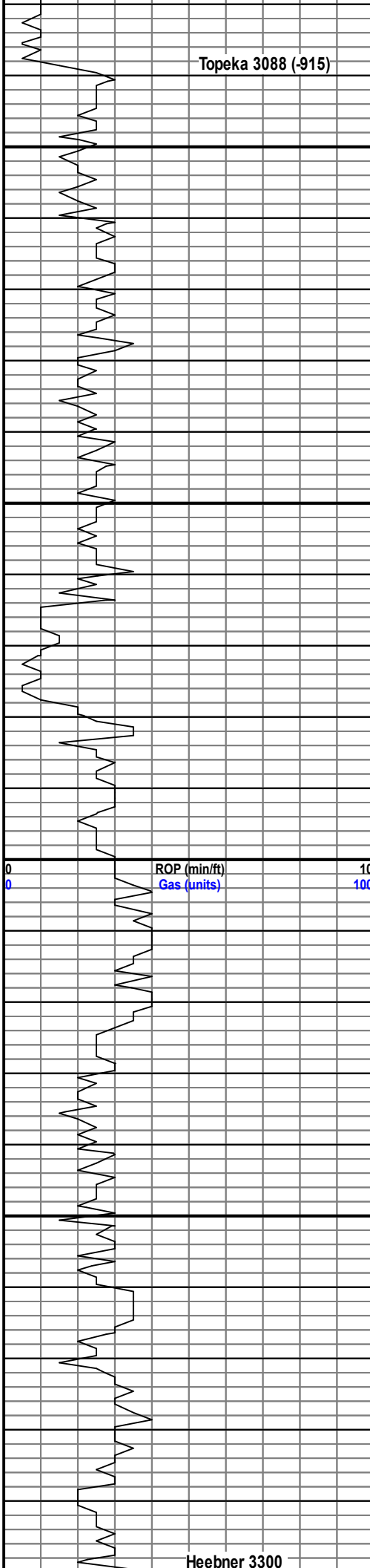
FORMATION	LOG TOP	SAMPLE TOP
Anhydrite	1506 (+667)	
Topeka	3085 (-912)	3088 (-915)
Heebner	3295 (-1122)	3300 (-1127)
Toronto	3315 (-1120)	3318 (-1123)
Lansing	3336 (-1163)	3338 (-1165)
BKC	3553 (-1380)	3556 (-1383)
Arbuckle	3577 (-1404)	3579 (-1406)
TD	3654 (-1481)	3657 (-1484)

DSTs

NONE

Comments

Production casing was ran to further test the economic potential of the Arbuckle formation.



Ls, crm-brn, wkstn-pkstn, pr vis por, foss frags;
Sh, a/a; ns, n/o

Ls, crm-tan, foss frags, pr vis por, ns, n/o

Ls, crm-tan, mst fxl, nvp, few gran w poss ixgran
por, ns, n/o

Ls, tan-gry-brn, fxl, ns, n/o

a/a some motl'd, ns, n/o

Sh, blk; Ls, tan, crm mst fxl, ns, n/o

Ls, crm, fxl, few ool, pr vis por, ns, n/o

Ls, crm-gry, cky in pt, some foss, ns, n/o

a/a; Chert, blk

Dolo, tan, suc, fr - gd suc por, ns, n/o 3190

Dolo, a/a to dolo, crm-brn, suc, fr-gd suc por,
ns, n/o 3200

Ls, tan-gry, fxl to gran, some foss, ns, n/o

Ls, crm, mdstn, few pc Chert, wh, ns, n/o

Ls, tan, fxl, shly, ns, n/o

Chert, op to brn, fresh, dse; Ls, crm, foss frags,
few pkstn-grnstn, ns, n/o

Ls, tan to wh, some sl cky, few pc spt'd surf stn,
sl sfo wh bxn, 1 pc spt'd sat'd stn, pr-sl por, fr-gd
odor, low rep. 3260

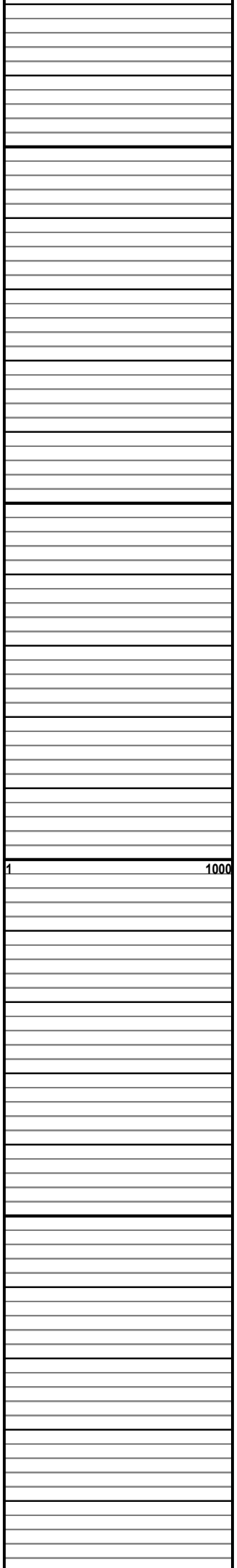
Chert, black; Ls, wh, pr vis por, sl cky, sl sfo wh
bxn, low rep, wk odor

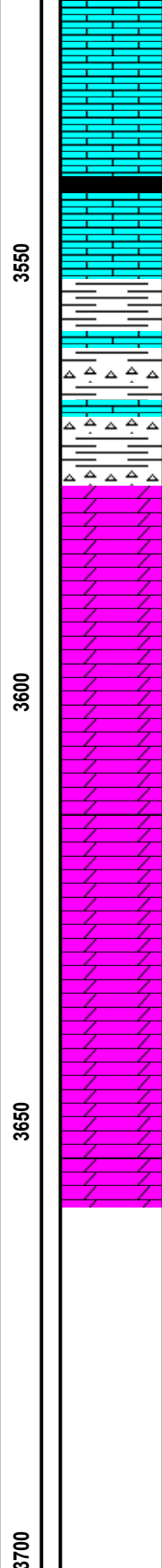
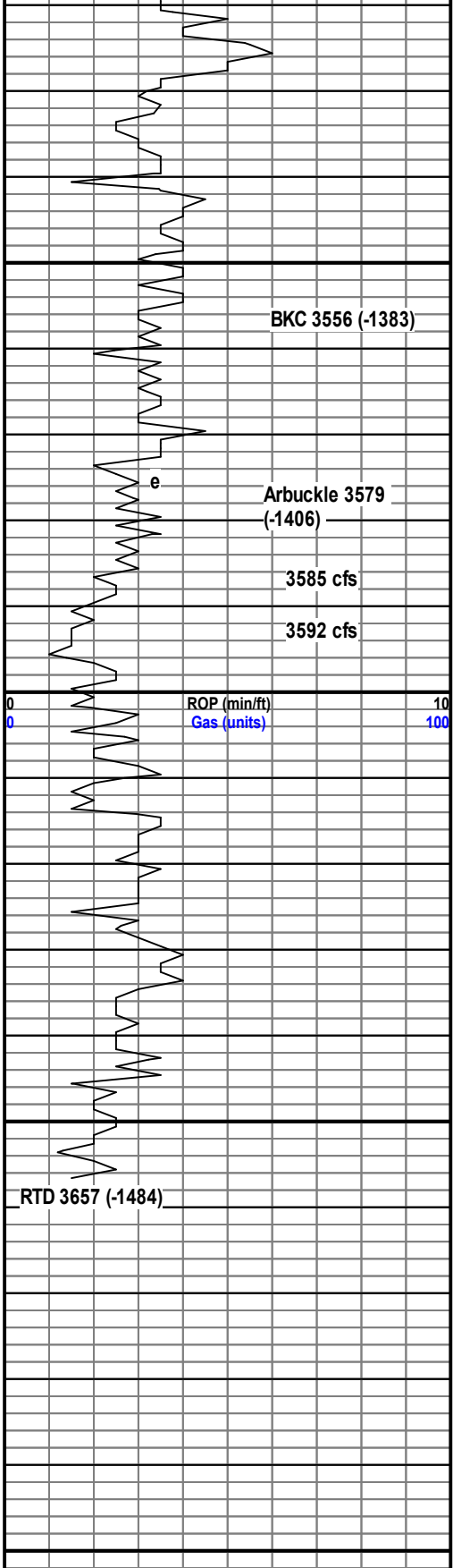
Ls, tan, fxl, motl'd, ns; Chert, blk, n/o

Ls, crm, fxl, sl cky, foss, nvp, ns; Chert, wh, n/o

Ls, gry-tan, wkstn, argil, ns, n/o 3300

Ls, wh-crm, fxl to pkstn, sl pp por to sl vg por, sl
sfo wh bxn, low rep, n/o





a/a to Ls, wh w lt oil stn on end

Sh, blk; Ls, crm-brn, fxl, ns, n/o

Ls, crm, mst fxl, ns; r pc w sl spt'd surf stn, v sl sfo, tite, n/o 3550

Ls, crm, fxl, some cherty, spt'd sl vg por, lt surf stn, n/o to Ls, wh ool, sl-fr ool por, sl-low fr sfo, l-med rep 3560 60 min

Sh, v.c., abdn't; Chert, gry to crm; sct'd Ls, fxl, few pc w spt'd surf stn, v sl sfo

Dolo, wh, suc-fmxi, sl-some fr ixl por, few fr vy por, sl-L fr sfo in few rx, few spt'd sat'd stn, wk odor 3585 60 min

Dolo, tan, f grn, sat'd stn, fr ixl por, fr to few gd sfo, fr odor 3592 40 min

Dolo, a/a, L-gd odor, sat'd stn, fr sfo 3600

Dolo, crm, f-mxl, fr ixl por, few gd vg por, sat'd stn, fr to few good sfo, fr rep, gd odor 3610

Dolo, wh-crm, f-mxl, L fr ixl por, few gd vg por, sat'd stn, fr to few gd sfo, good odor; Chert, white;

Dolo, a/a to Dolo crm, oom, sat'd stn, sl-L fr sfo, fr oom por, Chert, op, ool, L gd odor 3630

Dolo, crm, f-mxl, mst pr-sl por, few fr vg por, surf stn to few sat'd stn, decr sfo, fr odor 3640

Dolo, wh-tan, mst barren, tite; Chert, wh, ool v lt odor 3650

a/a to Dolo, salmon, mxl, few w hvly black tarry stn, n/o 3657

VIS 59
WL 7.2
Chlr 1200
LCM 10#

1 1000

FIELD TICKET & TREATMENT REPORT
CEMENT

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

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
9-26-13	new	Mascotte #3		20	95	18W	Osage
CUSTOMER		Pinnawills		TRUCK #	DRIVER	TRUCK #	DRIVER
Abundant		7W		463	Stan W		
MAILING ADDRESS		1 1/2 N		693	Stan W (Thayate)		
		W.M.		528	Jeremy S		
CITY	STATE	ZIP CODE					

JOB TYPE 2-stage HOLE DEPTH 3657' CASING SIZE & WEIGHT 5" x 215.5
 CASING DEPTH 3654 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8-12.5 WATER gal/sk _____ CEMENT LEFT in CASING 4740
 DISPLACEMENT 85.9 MIX PSI _____ RATE DU @ 1497'

REMARKS: Safety meeting on Royal Dole. Sludgear equipment crew on 3.5.7. 9.11.13.15
 19.21.23 Baskets on 6-54 DU Tool Top of 54. Rec up and circulate
 Pump 500 gal mud flush - 5 BBL water mix 140 sks ewc w/ 5% Red Seal.
 Wash pump and lines. Drop plus and displace 50 BBL water 363/4 BBL mud
 600* list 1700* hand shakedown, Drop DU Bomb w/ 10 min open 400 @ 1100*
 circulate 45 min. Pump 5 BBL water, mix 20 sks MH, 30 sks RTI. Mix
 350 sks 60/40 80 bac 1/4" Sbsal. Wash pump and lines. Drop plus and
 displace 36 BBL 6000 list close DU Tool @ 1500*. Cement did
 circulate @ 1100* to pit.
 Thanks Jerry & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3175.00	3175.00
5406	40 miles	MILEAGE	52.5	2100.00
5407A	23.8 ton	Ton mileage Delivery	12.5	1666.00
1126	140 sks	OWC	23.20	3318.00
1131	400 sks	60/40 pos	15.85	6340.00
1110A	700*	Red Seal	156	392.00
1118B	2752*	Bombardier	.27	743.04
1107	100*	Slb-seal	2.97	297.00
1144G	500 gal	Mud Flush	1.00	500.00
4159	1	5 1/2" ATU Flood shoe	433.25	433.25
4283	1	5 1/2" DU Tool w/ shakedown	4042.50	4042.50
4104	2	5 1/2" BASKETS	290.00	580.00
4130	10	5 1/2" Cementalizers	61.00	610.00
4310	1	5 1/2" Rodator	150.00	150.00
		Subtotal		22461.29
		less 1090		22461.29
		Subtotal		20215.17
		SALES TAX		
		ESTIMATED TOTAL		20215.17

Ravin 3737

AUTHORIZATION Randy Woodard TITLE _____ DATE _____

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.

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

**FIELD TICKET & TREATMENT REPORT
CEMENT**

TICKET NUMBER 44320
LOCATION Oakley K.
FOREMAN Quen

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/28/13		<u>Marcolle</u>	<u>20</u>	<u>9</u>	<u>18</u>	<u>Rooks</u>
CUSTOMER	<u>Advanced Oil Company A General Partnership</u>					
MAILING ADDRESS	<u>Plainville 2 W 1/2 N Winto</u>					
CITY	STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
<u>Grand Island</u>	<u>NE</u>	<u>68802</u>	<u>463</u>	<u>Cory</u>		
JOB TYPE	HOLE SIZE	HOLE DEPTH	TRUCK #	DRIVER	TRUCK #	DRIVER
<u>Surface</u>	<u>307.53</u>	<u>12 1/4</u>	<u>693</u>	<u>Jermey S</u>		

CASING DEPTH 307.53 DRILL PIPE _____
 SLURRY WEIGHT 14.8 SLURRY VOL 1.36 WATER gal/sk _____
 DISPLACEMENT 18.40 DISPLACEMENT PSI _____ MIX PSI _____
 CEMENT LEFT in CASING 20'
 OTHER _____

REMARKS: Safety Meeting, Rig upon Royal Drilling Run Casing Break Circulation
with rig pump Hookup to pump truck mix 225 sks Class A Cement 3%cc 28% Sol
Displace with 18.40 bbl water Shut in Washup pumps & Lines Rig Down

306-381-1810 Terry Gallowsy

Approx 5 bbl To Pit Cement Did Circulate
Thanks Darren & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 S	1	PUMP CHARGE	1150.00	1150.00
5406	40	MILEAGE	5.25	210.00
5407 A	10.58	<u>10 Mileage Delivery</u>	67.5	714.00
1104 S	225 SKS	<u>Class A Cement</u>	18.55	4173.75
1102	635 #	<u>Calcium Chloride</u>	.94	596.90
1118 B	423 #	<u>Bentonite</u>	.27	114.21
SubTotal			6985.96	6985.96
Less 10 %			698.59	698.59
SubTotal			6286.92	6286.92
SALES TAX				
ESTIMATED TOTAL				

AUTHORIZATION Doug Budig TITLE _____ DATE _____

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.