



KANSAS CORPORATION COMMISSION 1161741  
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: \_\_\_\_\_

1161741



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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ 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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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# RIG 6 DRILLING CO. INC

P O BOX # 227  
IOLA, KS 66749

R.K. (Bud) Sifers  
(620) 365-6294

John J. Barker  
(620) 365-7806

INVOICE #: 30597  
COMPANY: Piqua Petro, Inc  
ADDRESS: 1331 Xylan Rd.  
Piqua, KS 66761

DATE: 9/4/2013  
LEASE: Stockebrand  
COUNTY: Woodson  
WELL #: 5-13  
API #: 15-207-28,658

ORDERED BGreg

SERVICE	RATE	UNITS	
Location Pit Charge		1	N/C
Set Surface Csg.	\$250.00 Per Hr	4	N/C
Cement Surface/W.O.C.	\$250.00 Per Hr	8	N/C
Drilling Charge	\$10.00 Per Ft	1670	\$16,700.00
Circulating	\$250.00 Per Hr	2	\$0.00
Drill Stem Test	\$250.00 Per Hr		N/C
Logging	\$250.00 Per Hr		N/C
Core Samples	\$500.00 Per Run		N/C
Water Hauling	\$40.00 Per Hr	1	N/C
Bit Charge (Lime W/O)	Cost + 10%		N/C
Drill Stem Lost	\$28.00 Per Ft		N/C
Trucking	\$40. per hr + \$1./ mi		N/C
Roustabout	\$23.00 Per Man Hr		N/C
Running Casing	\$250.00 Per Hr	1	N/C
Rigging Up	\$250.00 Per Hr	1	N/C
Rigging Down	\$250.00 Per Hr	1	N/C
Other			
Fuel Assess.			
Move Rig			
Material Provided:			
X Cement	\$8.00 Per Sx	15	\$80.00
Sample Bags			\$0.00

TOTAL AMOUNT

\$16,780.00

REMIT TO:

RIG 6 DRILLING, INC  
PO BOX 227  
IOLA, KS 66749

\$16,780.00

THANK YOU !!! WE APPRECIATE YOUR BUSINESS !!!

**VALIDATED**  
Well Services, LLC

261809

TICKET NUMBER 42384  
LOCATION Atawaks  
FOREMAN Fred Mader

Chanute, KS 66720  
710 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-27-13	4950	Stackbrand # 5-13	NW 1	24	14	WD

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Pigna Petroleum	712	Fro Mad		
	666	Ger Mad		
	369	Der Mas		
	558	Mat Coc		

MAILING ADDRESS: 1331 Xylan Rd  
 CITY: Pigna STATE: KS ZIP CODE: 66761  
 JOB TYPE: Plug HOLE SIZE: 6 3/4 HOLE DEPTH: 1670 CASING SIZE & WEIGHT: N/A  
 CASING DEPTH: DRILL PIPE: 3 1/2" TUBING: OTHER: None  
 SLURRY WEIGHT: SLURRY VOL: WATER gal/sk: CEMENT LEFT in CASING: Full  
 DISPLACEMENT: N/A DISPLACEMENT PSI: MIX PSI: RATE: 5 BPM

REMARKS: Hold crew safety meeting. Establish circulation thru  
 Drill pipe. Spot 15 sks Cement @ TD. Rig Pull drill  
 pipe to 540'. Spot 15 sks Cement. Rig Pull drill pipe  
 to 250' Fill to Surface w/ Cement. Wash out drill pipe.

Total 92 sks 60/40 Poz Mix Cement 4% Gel

KCC Rep: Mike Hebron  
Rig 6 Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE Plug to 1st bore down	666	1085.00 ✓
5406	70	MILEAGE	666	294.00 ✓
5407A	289.9	Tom Miles		4087.6 ✓
55020	4 hrs	80 BBL Vac Truck	369	360.00 ✓
1131	92 sks	60/40 Poz Mix Cement		1212.56 ✓
1118B	317 #	Premium Gel		697.9 ✓
			7.15%	SALES TAX 91.69 ✓
				ESTIMATED TOTAL 3521.75 ✓

completed

AUTHORIZATION Bud Seper TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's... and conditions of service on the back of this form are in effect for services identified on this form

Ravin 3737

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P O BOX # 227  
IOLA, KS 66749

R.K. (Bud) Sifers  
(620) 365-6294

John J. Barker  
(620) 365-7806

COMPANY: Piqua Petro  
ADDRESS: 1331 Xylan Rd  
Piqua, KS 66761  
Greg Lair  
LEASE: Stochebrand  
COUNTY: Woodson  
LOCATION 3040' FSL 170' FWL  
Sec 1-Twp 24- Rng 14e

COMMENCED: 8/21/2013  
COMPLETED: 8/27/2013  
WELL #: 5-13  
API#: 15-207-28,658  
STATUS: Dry  
TOTAL DEPTH: 1670'-6 3/4"  
CASING: 40'-8 5/8" cmt w/ 15 sx  
PLUGGING 60' @ T.D., 50' @ 540', 250' to SURF  
Consolidated Cmt

## DRILLER'S LOG

2	Soil	1358	SH
9	Red Shot Clay	1385	LS w/Sdy LS
15	Limestone	1619	SH w/Sdy SH
99	SH w/Sdy SH	1621	LS
106	LS w/SH Brk	1626	SH w/Sdy SH
129	SH w/Red Bed	1627	LS w/SA
146	LS w/Sdy SH	1644	LS
469	SH w/LS Brks	1647	LS (SDY) lite odor
665	LS w/SH Strks	1653	LS
680	SH	1657	LS (SA) lite odor
694	LS	1670	LS
735	SH		
757	LS	1670	T.D.
786	SH		
815	LS		
876	BLK SH		
914	LS		
1094	SH		
1103	LS		
1206	SH w/LS Brks		
1208	COAL		
1251	SH		
1252	LS		
1260	SH & SA (Lite odor)		