



KANSAS CORPORATION COMMISSION 1169163  
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:

<input type="checkbox"/> New Well	<input type="checkbox"/> Re-Entry	<input type="checkbox"/> Workover	
<input type="checkbox"/> Oil	<input type="checkbox"/> WSW	<input type="checkbox"/> SWD	<input type="checkbox"/> SIW
<input type="checkbox"/> Gas	<input type="checkbox"/> D&A	<input type="checkbox"/> ENHR	<input type="checkbox"/> SIGW
<input type="checkbox"/> OG		<input type="checkbox"/> GSW	<input type="checkbox"/> Temp. Abd.
<input type="checkbox"/> CM (Coal Bed Methane)			
<input type="checkbox"/> Cathodic <input type="checkbox"/> Other (Core, Expl., etc.): _____			

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

<input type="checkbox"/> Deepening	<input type="checkbox"/> Re-perf.	<input type="checkbox"/> Conv. to ENHR	<input type="checkbox"/> Conv. to SWD
<input type="checkbox"/> Conv. to GSW			
<input type="checkbox"/> Plug Back: _____		Plug Back Total Depth: _____	
<input type="checkbox"/> Cummiled		Permit #: _____	
<input type="checkbox"/> Dual Completion		Permit #: _____	
<input type="checkbox"/> SWD		Permit #: _____	
<input type="checkbox"/> ENHR		Permit #: _____	
<input type="checkbox"/> 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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No		Datum
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Electric Log Submitted Electronically (If no, Submit Copy)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run:			

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

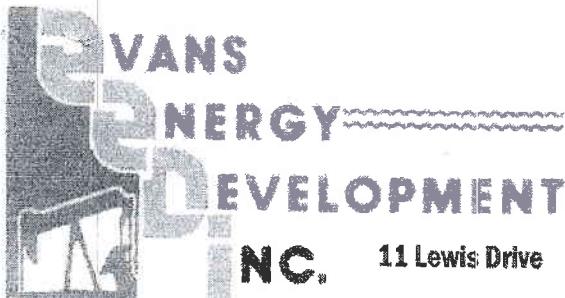
Purpose:  ____ Perforate ____ Protect Casing ____ Plug Back TD ____ Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives

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

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 (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water	Bbls.	Gas-Oil Ratio
					Gravity

DISPOSITION OF GAS:  <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION:  <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4)  <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL:  _____
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11 Lewis Drive Paola, KS 66071

*Kevin*  
Oil & Gas Well Drilling  
Water Wells  
Geo-Loop Installation

Phone: 913-557-9083  
Fax: 913-557-9084

#### WELL LOG

L & P Enterprises, LLC

Heeler #W10

API#15-121-29,598

September 5 - September 9, 2013

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
5	soil & clay	5
8	broken lime	13
13	shale	26
20	lime	46
27	shale	73 red
12	lime	85
101	shale	186
18	lime	204
13	shale	217
1	lime	218
1	shale	219
2	lime	221
11	shale	232
5	lime	237
35	shale	272
13	lime	285
15	shale	300
23	lime	323
1	shale	324
1	lime	325
8	shale	333
4	lime	337
2	lime	339 85% saturated good bleeding soft lime 15% white lime
2	lime	341 50% saturated good bleeding soft lime 50% lime
16	lime	357 few thin bleeding seams mainly solid lime
5	shale	362
12	lime	374 base of the Kansas City
21	shale	395
2	silty shale	397
6	sand	403 green & brown (gassy) ok bleeding
7	broken sand	410 green sand & shale, good bleeding (gassy)
2	silty shale	412
115	shale	527
6	lime	533
1	shale	534
2	lime	536 tan lime with porosity breaks, light bleeding

3	lime	539 broken, good saturation, good bleeding
1	lime	540 60% bleeding lime 40% lime, good bleeding
3	lime	543
38	shale	581
1	coal	582
5	shale	587
8	lime	595
13	shale	608
3	lime	611
57	shale	668
1.5	oil sand	669.5 light brown sand, minimal bleeding
0.5	silty shale	670
2	broken sand	672 60% brown sand good bleeding (gassy) 40% shale
1	lime	673
3	broken sand	676 40% brown ok bleeding, 60% shale gassy
1.5	silty shale	677.5
1	oil sand	678.5 good bleeding, gassy
0.5	silty shale	679
5.5	broken sand	684.5 30% good bleeding sand (gassy) 70% shale
2.5	silty shale	687
36	shale	723 TD

6743  
6843

Drilled a 9 7/8" hole to 20.1'

Drilled a 5 5/8" hole to 723'

Set 20.1' of 7" surface casing threaded and coupled cemented with 6 sacks of cement

Set 713' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp



## CONSOLIDATED SILVER BULLION, LLC

TICKET NUMBER 42460  
LOCATION ottawa KS  
FOREMAN Fred Madsen

262235

**FIELD TICKET & TREATMENT REPORT  
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
9-9-13	41828	Haefer # W-1D		H-1	NU 6	170	228	MI
CUSTOMER H & P Enterprises LLC				TRUCK #	DRIVER	TRUCK #	DRIVER	
MAILING ADDRESS 29975 Indianapolis Rd				712	Fred Mad			
CITY Paola		STATE KS	ZIP CODE 66071	495	Har Bec			
JOB TYPE Long string		HOLE SIZE 5 3/8	HOLE DEPTH 723	CASING SIZE & WEIGHT 2 7/8 x 13 1/2				
CASING DEPTH 713		DRILL PIPE	TUBING			OTHER		
SLURRY WEIGHT		SLURRY VOL	WATER gal/ok	CEMENT LEFT IN CASING 2 1/2" Plug				
DISPLACEMENT 4,150 BBL		DISPLACEMENT PSI	MIX PSI	RATE 5 BPM				
REMARKS: Hold crew safety meeting. Establish circulation. Mix Pump 100# Gel Flush Mix + Pump 100# SKS 50/50 Pm. Mix Cement 2% Gel $\frac{1}{2}$ " Please Seal SK. Cement to surface. Flush pump lines clean. Displaces 2 1/2" Rubber plug to casing TD. Pressure to 800# PSI. Release pressure to set float valve. Shut in casing.								

Evans Energy Director - Mitchell

*Fred Mader*

Flavin 3737

**AUTHORIZATION** Kevin By Phone

### 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.