



KANSAS CORPORATION COMMISSION 1169615
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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

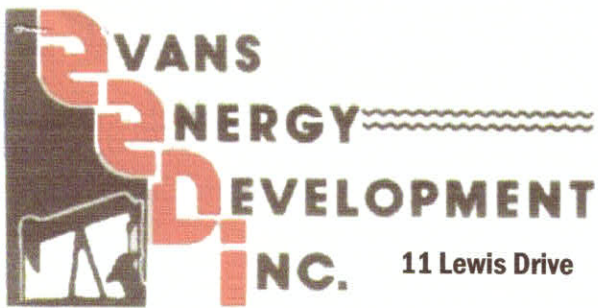
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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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11 Lewis Drive

Paola, KS 66071

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

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Verde Oil Company
Campbell #I-8-8
API #15-001-30,739
July 19- July 22, 2013

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
5	soil & clay	5
35	lime	40
8	shale	48
10	lime	58
5	shale	63
3	lime	66
20	shale	86
15	lime	101
3	shale	104
52	lime	156 base of the Kansas City
98	shale	254
9	lime	263
30	shale	293
3	lime	296
16	shale	312
3	lime	315
3	shale	318
10	lime	328
2	shale	330
4	lime	334
15	shale	349
4	lime	353
25	shale	378
2	lime	380
36	shale	416
20	lime	436
1	shale	437
7	lime	444
5	shale	449
1	lime	450
33	shale	483
15	lime	498 oil show
10	shale	508
3	lime	511
98	shale	609
1	lime	610
109	shale	719
4	silty shale	723 grey black
3	shale	726

2	silty shale	728
1	coal	729
38	shale	767
4	broken sand	771 brown sand & shale, minimal bleeding
3	shale	774
2	broken sand	776 brown & shale, no show
27	shale	803
4	broken sand	807 brown sand & shale, good bleeding
6	oil sand	813 brown sand, good bleeding
8	broken sand	821 brown sand & shale, good bleeding
8	oil sand	829 soft brown sand, good bleeding
0.5	coal	829.5
7.5	oil sand	837 soft brown sand, good bleeding
2	broken sand	839 shale & 40% brown and, good bleeding
18	oil sand	857 brown sand, good bleeding
10	oil sand	867 grey, ok bleeding
34	shale	901
1	coal	902
1	shale	903
1	lime	904 Mississippi TD

Drilled a 9 7/8" hole to 21.2'

Drilled a 5 5/8" hole to 904'

Set 21.2' of 7" threaded and coupled surface casing, cemented with 6 sacks cement.

Set 896.2' of 2 7/8" 8 round upset tubing with 4 centralizers, 1 float shoe, 1 clamp, 1 baffle



CONSOLIDATED
Oil Well Services, LLC

260849

TICKET NUMBER 42222

LOCATION Ottawa KS

FOREMAN Fred Maden

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	RANGE	COUNTY
7/23/13	8520	Campbell # I-8-8	SE 29	26	20	AL
CUSTOMER						
Verde Oil Co.						
MAILING ADDRESS						
3345 Arizona Rd						
CITY	STATE	ZIP CODE	TRUCK #			
Southernburg	KS	66772	712	Fred Mad		
			495	Kal Car		
			369	Dex Mas		
			515	Mer Rog		
DRIVER						

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 904 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 895 DRILL PIPE Baffle in TUBING @ 879 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING + Plug
 DISPLACEMENT 5.13BL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5BPM

REMARKS: Hold crew meeting. Establish pump rate. Mix + Pump, 100# Gel
Flush. Mix + Pump 114 sks 50/50 Poz Mix Cement 2 7/8 Gel 5% Salt 5# Kal Seal / sk. Cement to surface. Flush pump + lines
clean. Displace customer supplied 2 1/2" latch down plug to baffle. Pressure to 600# PSI. Release pressure to set float
value. Shut in casing.

Evans Energy Dev. Inc - Mitchell

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE	1085	1085 ⁰⁰	
5406	78 mi.	MILEAGE	294	294 ⁰⁰	
5402	895	Casing footage	N/C	N/C	
5407A	371.07	Ton Miles	523	523 ²¹	
5502C	2 1/2 hr	80 BBL Vac Truck	225	225 ⁰⁰	
1124	114 sks	50/50 Poz Mix Cement	1311	1311 ⁰⁰	
1118B	292 #	Premium Gel	64	64 ²⁴	
1111	221 #	Granulated Salt	86	86 ¹⁹	
1110A	570 #	Kal Seal	262	262 ²⁰	
				7.4%	
				SALES TAX	127 ⁵⁴
				ESTIMATED	
				TOTAL	3978 ³⁸

completed

[Signature]

Ravin 3737

AUTHORIZATION _____ 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.