



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1170563

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: _____

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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 ☐ Yes ☐ No
(Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No

Electric Log Submitted Electronically ☐ Yes ☐ No
(If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
Name Top Datum

CASING RECORD ☐ New ☐ 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

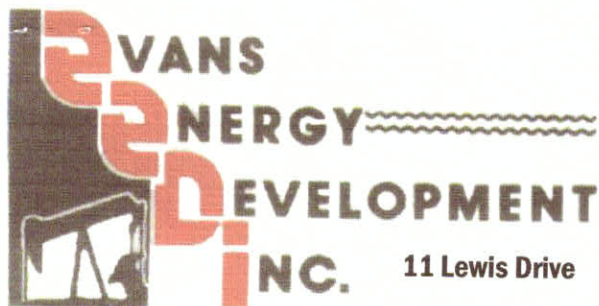
ADDITIONAL CEMENTING / SQUEEZE RECORD

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 (Amount and Kind of Material Used)	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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

Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Verde Oil Company

Campbell #I-85-95

API #15-001-30,741

July 2 - July 3, 2013

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
8	soil & clay	8
31	lime	39
1	shale	40
22	lime	62
4	shale	66
2	lime	68
17	shale	85
21	lime	106
2	shale	108
5	lime	113
4	shale	117
19	lime	136
2	shale	138
21	lime	159 base of the Kansas City
99	shale	258
7	lime	265
29	shale	294
3	lime	297
18	shale	315
4	lime	319
3	shale	322
9	lime	331
21	shale	352
2	lime	354
49	shale	403
1	lime	404
15	shale	419
4	lime	423
2	shale	425
13	lime	438 light oil show
3	shale	441
6	lime	447
4	shale	451
2	lime	453
33	shale	486
15	lime	501 brown, light oil show
13	shale	514

4	lime	518
47	shale	565
4	lime	569
18	shale	587
4	lime	591
16	shale	607
2	lime	609
3	shale	612
1	coal	613
14	shale	627
1	coal	628
32	shale	660
1	lime	661
58	shale	719
2	broken sand	721 50% shale, 50% brown sand, light bleeding
2	oil sand	723 brown sand, light bleeding
1	broken sand	724 brown sand & shale, ok bleeding
17	silty shale	741
24	shale	765
7	broken sand	772 brown & shale, light bleeding
10	silty shale	782
5	broken sand	787 50% brown 50% shale, ok bleeding
1	silty shale	788
6	broken sand	794 light brown & grey, no show
6	shale	800
8	broken sand	808 light brown & shale, no show
1	shale	809
2	broken sand	811 brown & grey, no oil
1	broken sand	812 brown & shale, good bleeding
19	oil sand	831 soft brown sand, good bleeding, few very thin shale seams
1	shale	832
4	broken sand	836 70% brown 30% shale, good bleeding
1	shale	837
5	oil sand	842 brown sand, good bleeding
2	broken sand	844 brown & limey sand, good bleeding
34	oil sand	878 black & grey, good bleeding
25	shale	903
2	lime	905 Mississippi TD

Drilled a 9 7/8" hole to 22.5'

Drilled a 5 5/8" hole to 905'

Set 22.5' of 7" threaded and coupled surface casing, cemented with 6 sacks cement.

Set 900.2' of use 2 7/8" 8 round upset tubing including 4 centralizers, 1 float shoe, 1 baffle, 1 clamp

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

260295

TICKET NUMBER 42119
LOCATION Ottawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-5-13	6520	Campbell # 85-95	SE 39	26	20	AL
CUSTOMER Verde Oil						
MAILING ADDRESS 3345 Arizona Rd						
CITY Savonburg	STATE KS	ZIP CODE 66772	TRUCK #	DRIVER	TRUCK #	DRIVER
			212	Er. Mad		
			495	Bar Bec		
			369	Dell Mas		
			570	Wil Max		

JOB TYPE <u>Long string</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>905'</u>	CASING SIZE & WEIGHT <u>2 7/8 EUE</u>
CASING DEPTH <u>900'</u>	DRILL PIPE <u>Baffle in</u>	TUBING @ <u>884</u>	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING <u>16' x Plug</u>
DISPLACEMENT <u>5.1480</u>	DISPLACEMENT PSI _____	MIX PSI _____	RATE <u>5 BPM</u>

REMARKS: Hold crew meeting. Establish pump rate. Mixt Pump 100 # Gel
Flush. Mixt Pump 108 SKS 50/50 Por Mix Cement 2 # Gel 5%
Salt & # Kol Seal/sk. Cement to surface. Flush pump & lines
clean. Displace 2k" Rubber plug to baffle in casing.
Pressure to 800 # PSI. Release pressure to set float Valve
shut in Casing.

Customer Supplied hatch down plug.
Evans Energy Dev. Inc. - Mitchell

Fred Maier

[illegible]

Rayin 3737

AUTHORIZTION

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.