



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1168120
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1168120

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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 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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Cobalt Energy LLC
Well Name	TM Unit 'A' 1-20
Doc ID	1168120

All Electric Logs Run

Neutron-Density
Dual Induction
Microlog
Sonic

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

November 13, 2013

Nicholas D. Hess
Cobalt Energy LLC
115 S. BELMONT #12
PO BOX 8037
WICHITA, KS 67208

Re: ACO1

Sec.-S-
County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Nicholas D. Hess

ALLIED OIL & GAS SERVICES, LLC 061127

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Oshtemo KS

DATE <u>9/13/13</u>	SEC. <u>27</u>	TWP. <u>18</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION <u>7:00 a.m.</u>	JOB START <u>12:00 p.m.</u>	JOB FINISH <u>1:00 p.m.</u>
LEASE <u>CS4 ONTA</u>	WELL # <u>1-27</u>	LOCATION <u>Oshtemo Hwy 83, Hwy 96 E, CR</u>			COUNTY <u>Ness</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>		<u>1/2 N W into</u>					

CONTRACTOR Southwind Drilling rig 8

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 4500'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 1800'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 18.46

OWNER Sam

CEMENT AMOUNT ORDERED 170 sks 60/40

4% gel 44# Flo-seal

COMMON	<u>102 sks @ 17.90</u>	<u>1825.80</u>
POZMIX	<u>68 sks @ 9.35</u>	<u>635.80</u>
GEL	<u>6 sks @ 23.90</u>	<u>140.90</u>
CHLORIDE	@	
ASC	@	
	<u>Flo-seal 42.5# @ 2.97</u>	<u>126.22</u>
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	<u>182.834# @ 2.48</u>	<u>453.42</u>
MILEAGE	<u>7.43 hrs @ 95 x 2.60</u>	<u>1884.61</u>
TOTAL		<u>5066.25</u>

EQUIPMENT

PUMP TRUCK CEMENTER Paul Borner

398 HELPER Mike Scathorn (Grant's son)

BULK TRUCK # 347 DRIVER Chris Helgstein

BULK TRUCK # _____ DRIVER _____

REMARKS:

mix 50 sks @ 1800'

mix 50 sks @ 250'

mix 20 sks @ 60'

R.H. 30 sks

M.H. 20 sks

Thank You!

CHARGE TO: Colbalt Energy LLC

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 1800'

PUMP TRUCK CHARGE 2249.84

EXTRA FOOTAGE @ _____

MILEAGE MILWA 95 @ 7.70 731.50

MANIFOLD MILU 95 @ 4.40 418.00

TOTAL 3399.34

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Darrell YATX

SIGNATURE Paul

SALES TAX (If Any) _____

TOTAL CHARGES 8,465.59

DISCOUNT 1,693.11 IF PAID IN 30 DAYS

6,772.47 Net.

ALLIED OIL & GAS SERVICES, LLC 061127

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Orkley KS

DATE <u>9/13/13</u>	SEC. <u>27</u>	TWP. <u>18</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION <u>7:00 a.m.</u>	JOB START <u>12:00 p.m.</u>	JOB FINISH <u>1:00 p.m.</u>
LEASE <u>Elsewanta</u>	WELL # <u>1-27</u>	LOCATION <u>Orkley Hwy 83, Hwy 910 E, CR</u>			COUNTY <u>Ness</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>			<u>1/2 N Winto</u>				

CONTRACTOR Southward Drilling rig 8 OWNER Sam

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 4500' CEMENT AMOUNT ORDERED 170 sks 60/40

CASING SIZE _____ DEPTH _____ 4 7/8 gel 4 1/2 Flo seal

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 1800'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 18.48

EQUIPMENT

PUMP TRUCK CEMENTER Paul Beaver

398 HELPER Mike Scathorn (Grant Sand)

BULK TRUCK _____

347 DRIVER Chris Helangstein

BULK TRUCK _____

_____ DRIVER _____

HANDLING 182.834 @ 2.48 453.92

MILEAGE 7.63 hrs @ 95 @ 2.60 1884.61

TOTAL 5066.25

REMARKS:

mix 50sks @ 1800'
mix 50sks @ 250'
mix 20sks @ 60'

R.H. 30 sks
M.H. 20sks

Thank You

SERVICE

DEPTH OF JOB 1800'

PUMP TRUCK CHARGE 2299.84

EXTRA FOOTAGE @ _____

MILEAGE MIN + 95 @ 7.70 731.50

MANIFOLD @ _____

MILU 95 @ 4.40 418.00

@ _____

TOTAL 3399.34

CHARGE TO: Colbalt Energy LLC

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

TOTAL _____

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Darrell YATK

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES 8,465.59

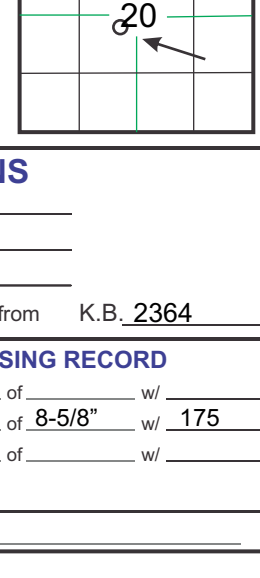
DISCOUNT 1,693.11 IF PAID IN 30 DAYS

6,772.47 Net.

GEOLOGICAL REPORT

Larry A. Nicholson

COMPANY **Cobalt Energy, LLC**
 API # **15-065-23980** FIELD _____
 LEASE **TM Unit "A" 1-20 NW NE NE SW** WELL # **1-20**
 LOCATION **2490' FSL & 2059' FWL NW NE NE SW**
 SURVEY **2490' FSL & 2059' FWL**
 SECTION **20** TWP **7S** RGE **23W**
 COUNTY **Graham** STATE **Kansas**



CONTRACTOR **Murfin** Rig # **24**
 SPUD **10-25-13 3:45 pm** COMP. _____
 RTD **3936'** LTD. **3938'**
 MUD UP AT **3087'**
 MUD TYPE **Chemical_MudCo**

ELEVATIONS
 K.B. **2364**
 D.F. _____
 G.L. **2359**
 All measurements from K.B. **2364**

SAMPLES SAVED FROM **3350'** TO **RTD**
 DRILLING TIME FROM **3350'** TO **RTD**
 SAMPLES EXAMINED FROM **3350'** TO **RTD**
 GEOLOGICAL SUPERVISION FROM **3350'** TO **RTD**
 WELLSITE GEOLOGIST **LARRY A. NICHOLSON**

CASING RECORD
 Conductor _____ of _____ wf _____ sx
 Surface **261** of **8-5/8"** wf **175** sx
 Production _____ of _____ wf _____ sx

ELECTRICAL SURVEYS **Pioneer, Den, Neu, Dual, Micro, Sonic**

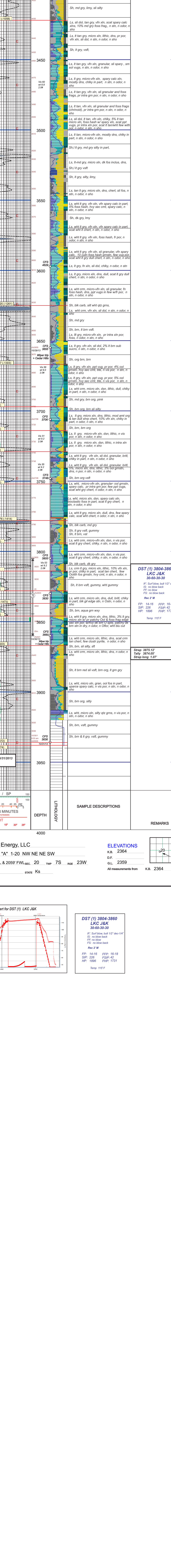
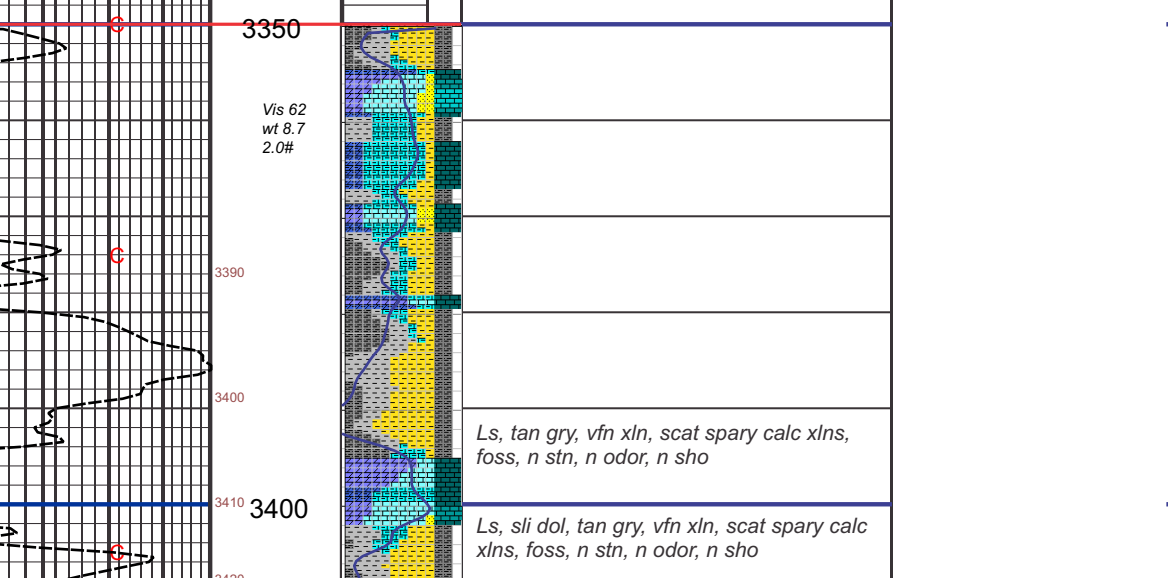
FORMATION	SAMPLE TOPS	SUBSEA DATUM	ELEC LOG TOPS	SUBSEA DATUM	REFERENCE WELL	
					A	B
STONE CORAL	2074	+290	2074	+290		
TOPEKA	3422	-1058	3422	-1058		
HEEBNER	3625	-1261	3625	-1261		
LANSING	3667	-1303	3667	-1303		
C	3687	-1333	3687	-1333		
D	3714	-1350	3714	-1350		
F	3729	-1365	3729	-1365		
G	3752	-1388	3752	-1388		
Mundie Ck	3778	-1414	3778	-1414		
BKC	3867	-1503	3867	-1503		
RTD	3936	-1572	3936	-1572		
LTD	3938	-1576	3938	-1574		

REFERENCE WELLS
 A: _____
 B: _____

REMARKS & RECOMMENDATIONS:
Based on dst results, lower structural position and absent of sample shows the well was P&A.

LAN 792, Modified 5/05, 11/11, 4/12 Hanover, KS 66645 1inch = 25.4mm 8.5 x 97.5 216 mm x 2460 mm

LEGEND



COMPANY **Cobalt Energy, LLC**
 LEASE **TM Unit "A" 1-20 NW NE NE SW** K.B. **2364**
 LOCATION **2490' FSL & 2059' FWL-BEC** 20 TWP **7S** RGE **23W** D.F. _____
 COUNTY **Graham** STATE **Ks** G.L. **2359** All measurements from K.B. **2364**



DST (1) 3804-3860 LKC J&K 30-60-30-30
 IF: Surf blow, but 1/2" dec-1/4"
 IS: no blow back
 FF: no blow back
 FS: no blow back
 Rec 2' M
 FFP: 14-16 FFP: 16-18
 SIF: 226 FSI: 42
 HPI: 1896 FHP: 1731
 Temp 115 F

Strap 3875.12'
Tally 3874.05'
Strap long 1.07'