



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1173607
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: _____

1173607

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 <i>(Attach Additional Sheets)</i>	<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	Datum
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:				

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> _____ <input type="checkbox"/> Commingled <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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263697

TICKET NUMBER 44783
LOCATION Ottawa
FOREMAN Alan Maden

PO Box 884, Ch... e, KS 66720
620-431-9210 or 8 J-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-4-13	1069	Coddington #13-1	SE 21	17	22	Mi

CUSTOMER Kensch Oil Well		
MAILING ADDRESS P.O. Box 520		
CITY Ottawa	STATE KS	ZIP CODE 66067

TRUCK #	DRIVER	TRUCK #	DRIVER
516	Alan Maden	Safety	Meat
368	Art McD		
369	Der Mas		
510	Set Tul		

JOB TYPE plug	HOLE SIZE 5 5/8	HOLE DEPTH 700	CASING SIZE & WEIGHT
CASING DEPTH	DRILL PIPE 700	TUBING	OTHER
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE

REMARKS: Held meeting. Loaded hole from pit to give room. Mixed & pumped 112 SK 50150 cement plus 6% gel. Pulled steel to 500' mixed & pumped 10 SK more. Pulled steel to 350'. Circulated cement to surface. Pulled steel out. Topped off well. Left hole full to surface.

67 SK total

Alan Maden

Evans Energy

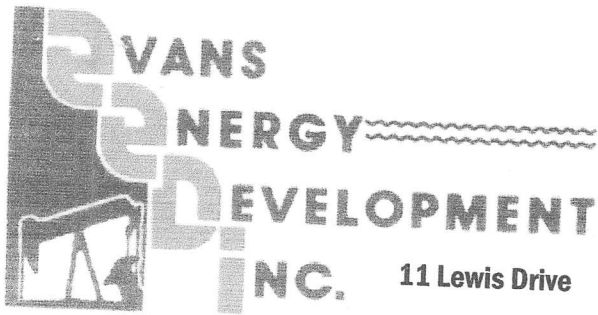
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	368	1088.00
5406	25	MILEAGE	368	10500
5407	min	four miles	510	36800
5502L	2hr	80 vgc	369	18000
1124	64	50150 cement		73600
1118B	323#	gel		71.06
			7.65	SALES TAX
				ESTIMATED TOTAL

completed

Ravin 3737

AUTHORIZATION Alan Maden TITLE RADIO PERSONALITY DATE _____
SALES TAX 61.74
ESTIMATED TOTAL 2606.80

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



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

Reusch Well Service, Inc.

Coddington #13-1

API # 15-121-29,718

October 28 - November 4, 2013

Thickness of Strata

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
15	soil & clay	15
23	shale	38
23	lime	61
26	shale	87
4	lime	91
26	shale	117
20	lime	137
9	shale	146
28	lime	174 oil show 157
5	shale	179
24	lime	203
3	shale	206
13	lime	219 base of the Kansas City
26	shale	245
11	sand	256 grey, no oil
69	shale	325
8	sand	333 green, no oil
24	shale	357
4.5	limy oil sand	361.5 brown, good bleeding
1	limy oil sand	362.5 brown 10% bleeding
0.5	limy oil sand	363 brown, good bleeding
1	limy oil sand	364 brown 10% bleeding
0.5	limy oil sand	364.5 brown 90% bleeding
5	shale	369.5
7	broken sand	376.5 brown & green, 50% bleeding
1	lime	377.5
4.5	broken sand	382 brown & green, ok bleeding
11	lime	393
3	shale	396
20	sand	416 green, no oil
31	shale	447
9	lime	456
9	shale	465
4	lime	469
14	shale	483
4	lime	487
27	shale	514
2	lime	516

9	shale	525
3.5	broken oil sand	528.5 brown & green, 90% bleeding
8.5	broken sand	537 brown & gree, no bleeding
31	silty shale	568
1	lime & shells	569
11	shale	580
1	lime & shells	581
15	shale	596
9	sand	605 grey & brown, oil odor
8	shale	613
1	coal	614
16	shale	630
1	coal	631
1	shale	632
7	sand	639 grey, no oil
2	shale	641
10	sand	651 white, no oil
49	shale	700 TD

Drilled a 9 7/8" hole to 22.1'

Drilled a 5 5/8" hole to 700'

Set 22.1' of 7" surface casing cemented with 6 sacks of cement.

This well was plugged by Consolidated Oil Well Service