

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1180162

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 #			API No. 15					
Name:			Spot Description:					
Address 1:			SecTwpS. R					
Address 2:			Fe	eet from	South Line of Section			
City:	State: Z	ip:+	Fe	eet from East / V	West Line of Section			
Contact Person:			Footages Calculated from N	Nearest Outside Section Co	orner:			
Phone: ()			□ NE □ NW	/ □SE □SW				
CONTRACTOR: License #			GPS Location: Lat:	, Long:				
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)			
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84				
Purchaser:			County:					
Designate Type of Completion:			Lease Name:	We	ell #:			
	e-Entry	Workover	Field Name:					
	_		Producing Formation:					
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing: _				
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total De	epth:			
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet			
☐ Cathodic ☐ Other (Co	ore, Expl., etc.):		Multiple Stage Cementing (Collar Used? Yes	No			
If Workover/Re-entry: Old Well I			If yes, show depth set:		Feet			
Operator:			If Alternate II completion, ce	ement circulated from:				
Well Name:			feet depth to:	w/	sx cmt.			
Original Comp. Date:								
Deepening Re-perf	•	ENHR Conv. to SWD	Drilling Fluid Managemen	nt Dian				
☐ Plug Back	Conv. to G		(Data must be collected from the					
Commingled	Pormit #:		Chloride content:	ppm Fluid volume:	bbls			
Dual Completion			Dewatering method used:_					
SWD			Location of fluid disposal if	hauled offsite:				
☐ ENHR								
GSW	Permit #:		Operator Name:					
_ _			Lease Name:	License #:				
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East _ West			
Recompletion Date		Recompletion Date	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.

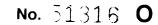
Submitted Electronically

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:								

Page Two



Operator Name:				Lease N	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	:					
	ow important tops of fo ing and shut-in pressu o surface test, along wi	res, whe	ther shut-in pre	ssure reacl	hed stati	c level, hydrosta	tic pressures, bo			
Final Radioactivity Logilles must be submitted						gs must be ema	iled to kcc-well-lo	ogs@kcc.ks.go	v. Digital	electronic log
Drill Stem Tests Taken (Attach Additional S		Ye	es No			3	on (Top), Depth a			Sample
Samples Sent to Geol	ogical Survey	Ye	es 🗌 No		Nam	9		Тор	L	Datum
Cores Taken Electric Log Run		☐ Y€								
List All E. Logs Run:										
			CASING	RECORD	│ Ne	w Used				
		Repo				rmediate, producti	on, etc.			
Purpose of String	Size Hole Drilled		e Casing t (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		and Percent dditives
Purpose	Depth					EEZE RECORD				
Purpose: Perforate	Top Bottom				Used	Type and Percent Additives				
Protect Casing Plug Back TD										
Plug Off Zone										
Did you perform a hydrau	ilic fracturing treatment or	this well?	?			Yes	No (If No, sk	ip questions 2 ar	nd 3)	
	otal base fluid of the hydra		•		•			ip question 3)		
Was the hydraulic fractur	ing treatment information	submitted	to the chemical of	disclosure reg	gistry?	Yes	No (If No, fil	out Page Three	of the ACC)-1)
Shots Per Foot			RD - Bridge Plug Each Interval Perl				cture, Shot, Cemen		d	Depth
TUBING RECORD:	Size:	Set At:		Packer At	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or ENH	R.	Producing Meth Flowing	nod:	g 🗌	Gas Lift C	other (Explain)			
Estimated Production Per 24 Hours	Oil Bl	bls.	Gas	Mcf	Wate	er Bl	ols.	Gas-Oil Ratio		Gravity
DIODOGITI	ON OF CAC			ACTUOD OF	COMPLE	TION		DDODUGT)	
Vented Sold	ON OF GAS: Used on Lease		N Open Hole	NETHOD OF \Box Perf.	Dually	Comp. Con	nmingled	PRODUCTIO	ואו ואו EK'	/AL:
(If vented, Sub			Other (Specify)		(Submit A	ACO-5) (Subi	mit ACO-4)			

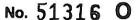




OIL PATCH PUMP & SUPPLY INC.

OIL COUNTRY & INDUSTRIAL SUPPLY HOUSE
P.O. BOX 591 CHANUTE, KANSAS 66720 620-431-1890
CHANUTE: 1-800-279-0116 OSAWATOMIE: 1-800-432-0217
INDEPENDENCE: 1-620-331-4580 IOLA: 1-620-365-5265
MADISON: 1-620-437-2100 WELLSVILLE: 1-785-883-4500 www.oilpatchpump.com

DLD ro	www.oilpatchpu	mp.com	DATE		CUSTON	1ER P.O.	
			DELIVERED		PICK-UP		
			CHARGE	CASI	H RETURN	QUOT	TE .
ANTITY DESCRIPTION		PART#	UNIT LIST PRIC	E DI	SC. AGREED TERMS	AMO	DUNT
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RECEIVED BY:				-	SUBTOTAL SALES TAX	 	5.4
LOCATION:					TOTAL	1	+
COUNTY:	QUALITY OF USI WITHOUT WARR	D PRODUCTS	ARE BASED	ON GC	OD FAITH OPIN	ION ONLY	





SOLD TO

OIL PATCH PUMP & SUPPLY INC.

OIL COUNTRY & INDUSTRIAL SUPPLY HOUSE OIL COUNTRY & INDUSTRIAL SUPPLY HOUSE
P.O. BOX 591 CHARUTE, KANSAS 66720 620-431-1890
CHANUTE: 1-605 ELL THE CONTROL OSAWATONIE: 1-600-432-0217
INDEPENDENCE: 1120-431-1600 IOLA: 1-620-365-5265
MADISON: 1-620-437-2100 VELLSVILLE: 1-765-683-4500
DALE JACKSON PRODUMENTAL SUPPLY HOUSE

DATE

DATE

TO	P.O. BOX 266 MOUND CITY XS 65056 (9.3)756-2246	ump.com	DATE G// DELEVERED						
		<u></u>		CHARGE	CASH	RET	JRN	QUOTE	
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MACHINE BILLING.

Avery Lumber

MOUND CITY, KS 66056 {913} 795-2210 FAX {913} 795-2194

Customer Copy INVOICE

PLEASE REFER TO INVOICE NUMBER ON ALL CORRESPONDENCE

Page: 1			Invoice: 100	50907
Special :			Time:	12:00:06
Instructions :			Ship Date:	09/17/13
:			Invoice Date:	09/17/13
Sale rep #: TLIKELY TOM		Acct rep code:	Due Date:	0/05/13
Sold To: DALE JACKSON		Ship To: DALE JACKSON		
2449 HWY 7) - 2449 HWY 7		
MAPLETON, KS 66754		MAPLETON, KS 6	6754	
) -		
Customer #: 319420	Customer PO:	Orde	r By:	

5TH T 17 popimg01 ORDER SHIP : L U/M ITEM# DESCRIPTION Alt Price/Uom PRICE **EXTENSION** 40.00 40.00 L BAG CPPM POST SET FLY ASH 75# 7.1010 BAG 7,1010 284.04 1.00 1.00 L EA CPQP QUIKRETE PALLETS 17.0000 EA 17.0000 17.00

> LIN Lea PH8 PH8 MB

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER			Sales total	\$301.04
SHIP VIA	Customer Pickup	O ND IN GOOD CONDITION		Taxable	301.04		
x				Non-taxable Tax #		Sales tax	21.52

2 - Customer Copy



TOTAL \$322.56