



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1184126
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: _____

1184126

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 <i>(Explain)</i> _____
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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> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Jason Oil Company, LLC
Well Name	UNREIN 1
Doc ID	1184126

Tops

Name	Top	Datum
ANHYDRITE	1345	+866
HEEBNER	3656	-1445
TORONTO	3677	-1466
LKC	3707	-1496
BKC	4020	-1809
PAWNEE	4115	-1904
CHEROKEE	4227	-2016
MISSISSIPPI	4269	-2058

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

785-483-2025
85-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 7652

Date	11-29-13	Sec.	25	Twp.	20	Range	20	County	Pawnee	State	KS	On Location		Finish	4:15 AM
								Location							
Lease								Well No.		Owner					
Contractor										To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.					
Type Job										Charge To					
Hole Size								T.D.		To					
Csg.								Depth		Street					
Tbg. Size								Depth		City State					
Tool								Depth		The above was done to satisfaction and supervision of owner agent or contractor.					
Cement Left in Csg.								Shoe Joint		Cement Amount Ordered					
Meas Line								Displace							
EQUIPMENT												Common			
Pumptrk	No.	Cementer											Poz. Mix		
Bulktrk	No.	Driver											Gel.		
Bulktrk	No.	Driver											Calcium		
JOB SERVICES & REMARKS												Hulls			
Remarks:												Salt			
Rat Hole												Flowseal			
Mouse Hole												Kol-Seal			
Centralizers												Mud CLR 48			
Baskets												CFL-117 or CD110 CAF 38			
D/V or Port Collar												Sand			
Pipe on bottom broke circulation pump and 500 gal												Handling			
Mud CLR 48 with 10% salt 5% gel. Plug												Mileage			
Rat hole with 30 SX. Hooked to 5% salt												FLOAT EQUIPMENT			
170 SX COM 10% salt 5% gel. concrete shut down												Guide Shoe			
washed pump and lines. Replaced plug and displaced												Centralizer			
with 10% salt 5% gel. plug landed and held												Baskets			
AFU inserts 900												AFU Inserts			
												Float Shoe			
												Latch Down			
Plug landed at 1400 PSI												Pumptrk Charge			
												Mileage			
X Signature <i>Steve Puhert</i>												Tax			
												Discount			
												Total Charge			

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 7244

Date	11-20-13	Sec.	25	Twp.	20	Range	20	County	Padon	State	KS	On Location		Finish	5:45 PM
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Lease Uppin Well No. 1 Location Rushcent, S to CL, S to V.R.

Contractor Southwind #70 Owner 320R1
 Type Job Surface To Quality Oilwell Cementing, Inc.
 Hole Size 12 1/4 T.D. 1163 You are hereby requested to rent cementing equipment and furnish
 Csg. 588 Depth 1162.96 cementer and helper to assist owner or contractor to do work as listed.
 Tbg. Size _____ Charge To Jason O.I
 Tool _____ Street _____
 Cement Left in Csg. _____ Depth _____ City _____ State _____
 Meas Line _____ Shoe Joint 39.49 The above was done to satisfaction and supervision of owner agent or contractor.
 Displace 71.44 Cement Amount Ordered 450 vcom 2% ad 2% gel

EQUIPMENT

Pumptrk	15	No.	Cementer	
			Helper	<u>Nick</u>
Bulktrk	12	No.	Driver	
			Driver	<u>Leanne M</u>
Bulktrk	4	No.	Driver	
			Driver	<u>Travis</u>

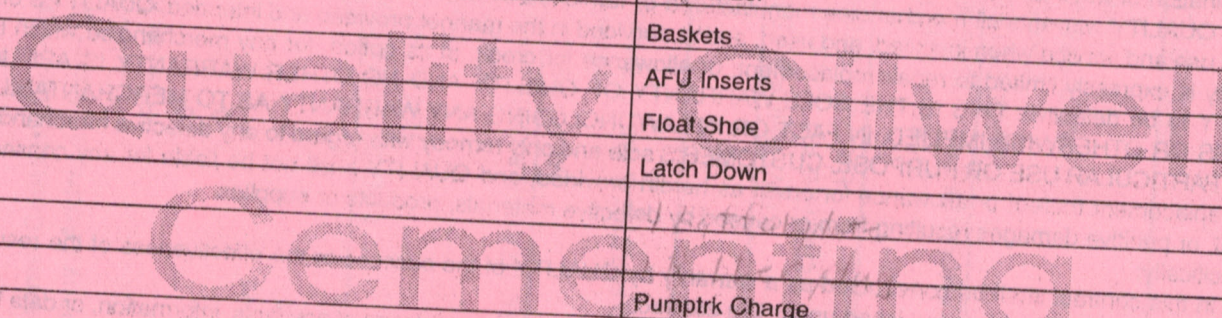
Common	
Poz. Mix	<u>180</u>
Gel.	
Calcium	
Hulls	
Salt	<u>16</u>
Flowseal	
Kol-Seal	<u>900#</u>
Mud CLR 48	<u>500 gal</u>
CFL-117 or CD110 CAF 38	
Sand	
Handling	
Mileage	<u>205</u>

JOB SERVICES & REMARKS

Remarks: Cement did circulate
 Rat Hole _____
 Mouse Hole _____
 Centralizers _____
 Baskets _____
 D/V or Port Collar _____

FLOAT EQUIPMENT

Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	
Pumptrk Charge	
Mileage	<u>15 prod long string</u>



Signature [Signature]

Tax	
Discount	
Total Charge	



DRILL STEM TEST REPORT

Prepared For: **Jason Oil Company LLC**

PO Box 701
Russell KS 67665-0701

ATTN: Jim Schoenberger, Ste

Unrein #1

25-20s-20w Pawnee,KS

Start Date: 2013.11.27 @ 17:16:03

End Date: 2013.11.28 @ 00:24:12

Job Ticket #: 55452 DST #: 1

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2013.11.29 @ 11:55:59



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Jason Oil Company LLC

25-20s-20w Pawnee, KS

PO Box 701
Russell KS 67665-0701

Unrein #1

Job Ticket: 55452

DST#: 1

ATTN: Jim Schoenberger, Ste

Test Start: 2013.11.27 @ 17:16:03

GENERAL INFORMATION:

Formation: **Miss**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 19:27:43

Time Test Ended: 00:24:12

Test Type: Conventional Bottom Hole (Initial)

Tester: Ray Schwager

Unit No: 70

Interval: 4268.00 ft (KB) To 4275.00 ft (KB) (TVD)

Reference Elevations: 2211.00 ft (KB)

Total Depth: 4275.00 ft (KB) (TVD)

2199.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 12.00 ft

Serial #: 8369 Inside

Press@RunDepth: 204.38 psig @ 4269.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.11.27

End Date:

2013.11.28

Last Calib.:

2013.11.28

Start Time: 17:16:03

End Time:

00:24:12

Time On Btm:

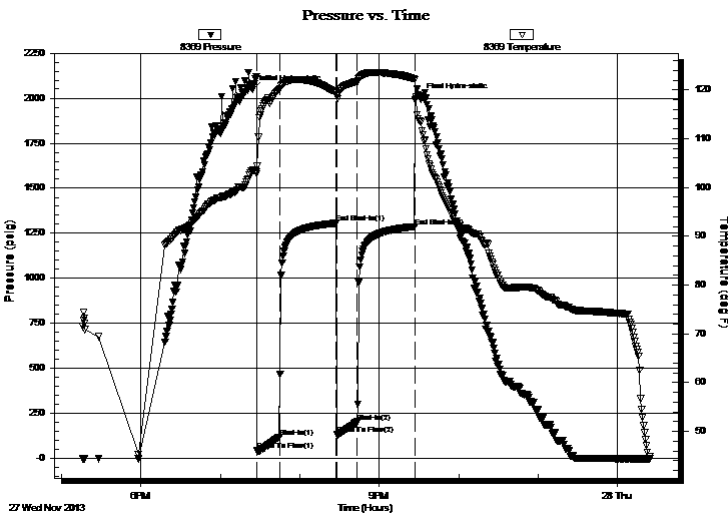
2013.11.27 @ 19:24:28

Time Off Btm:

2013.11.27 @ 21:30:58

TEST COMMENT: 15-IFP-strg bl in 1 min
45-ISIP-strg bl bk
15-FFP-strg bl thru-out
45-FSIP-strg bl bk

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2046.13	103.52	Initial Hydro-static
4	46.79	102.83	Open To Flow (1)
21	121.59	120.05	Shut-In(1)
63	1306.72	119.49	End Shut-In(1)
64	133.88	118.85	Open To Flow (2)
79	204.38	121.76	Shut-In(2)
123	1287.99	122.27	End Shut-In(2)
127	2001.63	113.57	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	2540'GIP	0.00
795.00	CO	11.15
72.00	HO&GCM 25%G20%O10%W35%M	1.01

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Jason Oil Company LLC

25-20s-20w Pawnee,KS

PO Box 701
Russell KS 67665-0701

Unrein #1

Job Ticket: 55452

DST#: 1

ATTN: Jim Schoenberger, Ste

Test Start: 2013.11.27 @ 17:16:03

Tool Information

Drill Pipe:	Length: 4252.00 ft	Diameter: 3.80 inches	Volume: 59.64 bbl	Tool Weight: 2200.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 60000.00 lb
			<u>Total Volume: 59.64 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	5.00 ft			String Weight: Initial 46000.00 lb
Depth to Top Packer:	4268.00 ft			Final 47000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	7.00 ft			
Tool Length:	28.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4248.00	
Shut In Tool	5.00			4253.00	
Hydraulic tool	5.00			4258.00	
Packer	5.00			4263.00	21.00 Bottom Of Top Packer
Packer	5.00			4268.00	
Stubb	1.00			4269.00	
Recorder	0.00	8369	Inside	4269.00	
Recorder	0.00	8700	Outside	4269.00	
Perforations	3.00			4272.00	
Bullnose	3.00			4275.00	7.00 Bottom Packers & Anchor
Total Tool Length:	28.00				



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jason Oil Company LLC

25-20s-20w Pawnee,KS

PO Box 701
Russell KS 67665-0701

Unrein #1

Job Ticket: 55452

DST#: 1

ATTN: Jim Schoenberger, Ste

Test Start: 2013.11.27 @ 17:16:03

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

35 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.77 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 7000.00 ppm

Filter Cake: 2.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	2540'GIP	0.000
795.00	CO	11.152
72.00	HO&GCM 25%G20%O10%W35%M	1.010

Total Length: 867.00 ft Total Volume: 12.162 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

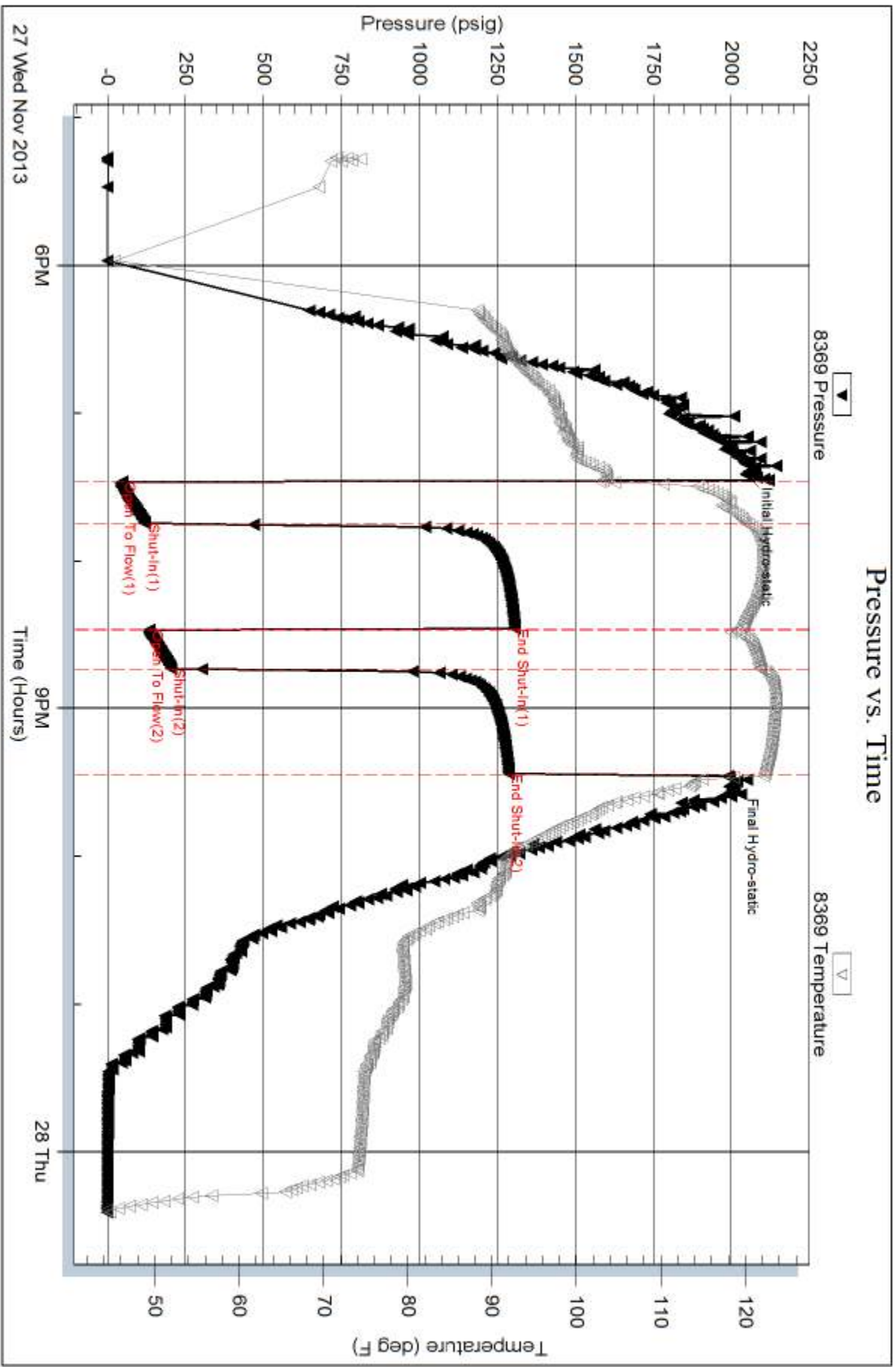
Serial #: 8369

Inside

Jason Oil Company LLC

Unrein #1

DST Test Number: 1

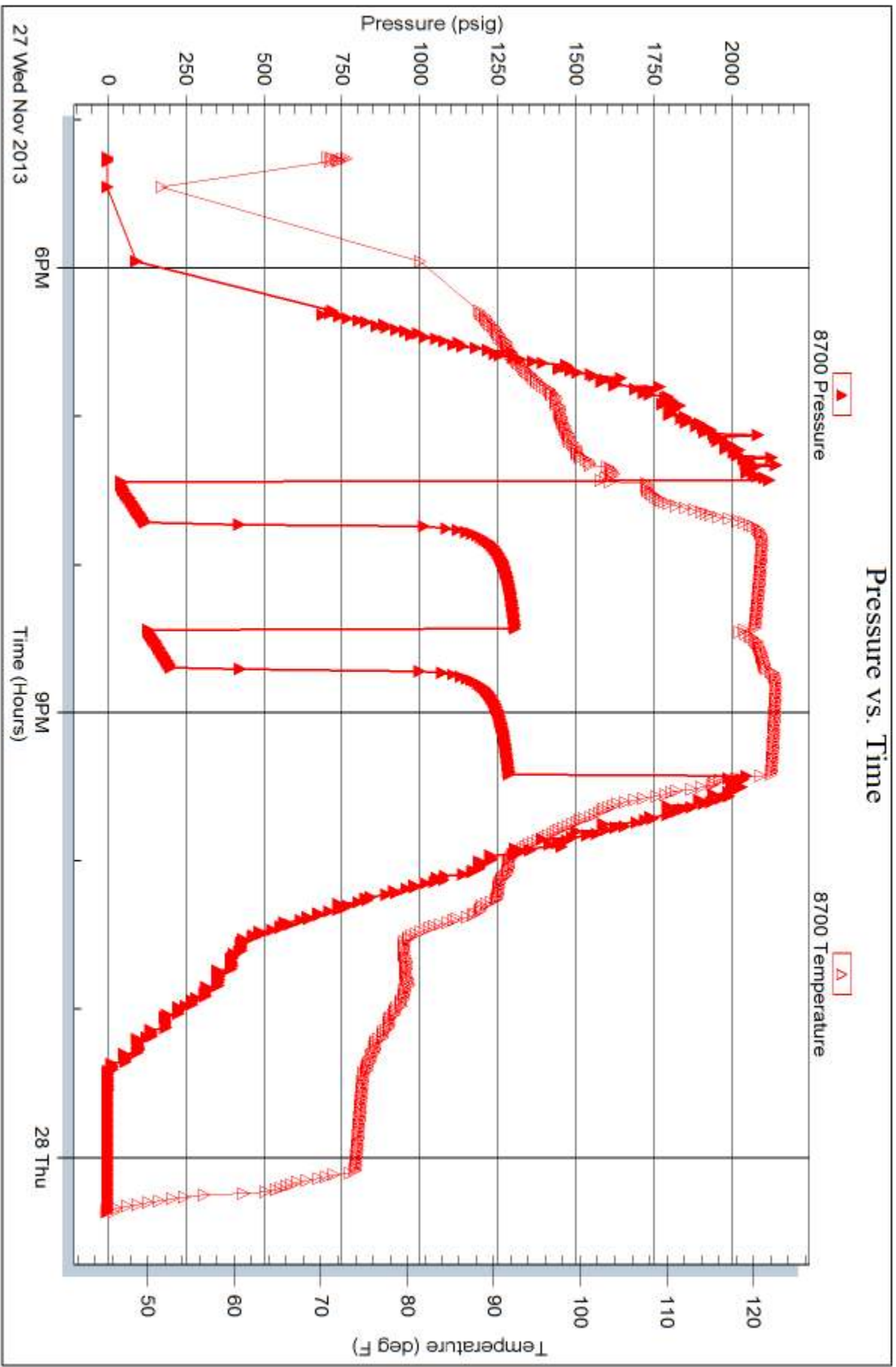


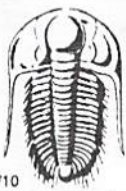
Serial #: 8700

Outside Jason Oil Company LLC

Unrein #1

DST Test Number: 1





TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 55452

Well Name & No. Unrein #1 Test No. 1 Date 11-27-13
 Company Jason Oil Company LLC Elevation 2211 KB 2199 GL
 Address P.O. Box 701 Russell, Ks 67665-0701
 Co. Rep / Geo. Steve Reed Rig Southwind rig 70
 Location: Sec. 25 Twp. 20^S Rge. 20^W Co. Pawnee State Ks

Interval Tested 4268-4275 Zone Tested Miss
 Anchor Length 7 Drill Pipe Run 4252 Mud Wt. 9.2
 Top Packer Depth 4263 Drill Collars Run - Vis 52
 Bottom Packer Depth 4268 Wt. Pipe Run - WL 8.8
 Total Depth 4275 Chlorides 7000 ppm System LCM 1#

Blow Description IFP - STRONG BLOW IN 1 MIN
ISTP - STRONG BLOW THRU-OUT
FFP - STRONG BLOW THRU-OUT
KSTP - STRONG BLOW BACK

Rec	Feet of	%gas	%oil	%water	%mud
<u>2540</u>	<u>GIP</u>				
<u>795</u>	<u>CO</u>				
<u>72</u>	<u>HO+GCM</u>	<u>25</u>	<u>20</u>	<u>10</u>	<u>35</u>

Rec Total 867 BHT 122 Gravity 35 API RW - @ - °F Chlorides - ppm

(A) Initial Hydrostatic 2046 Test 1250 T-On Location 1545
 (B) First Initial Flow 46 Jars - T-Started 1715
 (C) First Final Flow 121 Safety Joint - T-Open 1925
 (D) Initial Shut-In 1306 Circ Sub - T-Pulled 2125
 (E) Second Initial Flow 133 Hourly Standby - T-Out 2024
 (F) Second Final Flow 204 Mileage 106 RT 164.30 Comments -
 (G) Final Shut-In 1288 Sampler -
 (H) Final Hydrostatic 2001 Straddle - Ruined Shale Packer -
 Shale Packer - Ruined Packer -
 Extra Packer - Extra Copies -
 Extra Recorder - Sub Total 0
 Day Standby - Total 1414.30
 Accessibility - MP/DST Disc't -

Initial Open 15
 Initial Shut-In 45
 Final Flow 15
 Final Shut-In 45

Sub Total 1414.30
 Approved By _____ Our Representative Ray Schwager *Thank you*

Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.