



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1184994
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: _____

1184994

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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QUALITY OILWELL CEMENTING, INC.

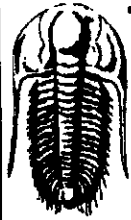
Federal Tax I.D.# 20-2886107

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

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

No. 7291

Date	8-17-13	Sec.	41	Twp.	9	Range	19	County	Rooks	State	KS	On Location		Finish	10:45				
Location								Zurich 5 N 3/8 W S Fns											
Lease	McClellan			Well No.	2			Owner											
Contractor	Discovery #4			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	Surface			Charge To								Zinszer Owl							
Hole Size	12 1/4			T.D.	1425'			Street											
Csg.	8 5/8			Depth	1425'			City								State			
Tbg. Size				Depth				The above was done to satisfaction and supervision of owner agent or contractor.											
Tool				Depth				Cement Amount Ordered								550 com 3% CC 2% Gel 1/4 Flo			
Cement Left in Csg.	12'			Shoe Joint	12'			Meas Line								Displace 90 bbl			
EQUIPMENT																			
Pumptrk	15		No.	Cementer	Nick		Brett		Common								550		
Bulktrk	8		No.	Helper					Poz. Mix										
Bulktrk	19		No.	Driver	Lonnie W				Gel.								10		
				Driver	Lonnie M				Calcium								20		
				Driver					Hulls										
JOB SERVICES & REMARKS																			
Remarks:								Salt											
Rat Hole								Flowseal											
Mouse Hole								Kol-Seal											
Centralizers								Mud CLR 48											
Baskets - 85								CFL-117 or CD110 CAF 38											
D/V or Port Collar								Sand											
								Handling								580			
								Mileage								8 1/2			
<p style="font-size: 2em; opacity: 0.5;">Cement Circulated!!</p>								FLOAT EQUIPMENT											
								Guide Shoe											
								Centralizer											
								Baskets - 1											
								AFU Inserts											
								Float Shoe											
								Latch Down											
								Baffle Plate - 1											
								Rubber Plug - 1											
								Pumptrk Charge								Long Surface			
Mileage								36											
												Tax							
												Discount							
												Total Charge							
X Signature <i>Mike Blasek</i>																			



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Zinszer Oil Co INC

4-9s-19w

Po Box 211
Hays Ks 67601

McClellan #2

Job Ticket: 041752 DST#: 1

ATTN: Marc Downing

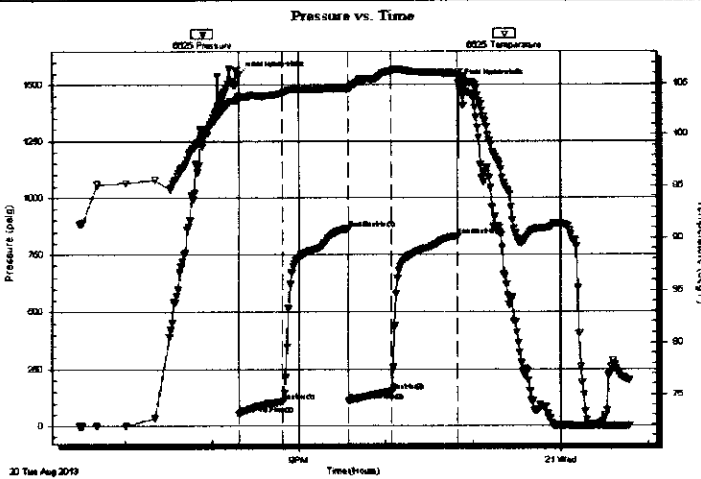
Test Start: 2013.08.20 @ 18:28:28

GENERAL INFORMATION:

Formation: **Toronto-LKC-C**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 20:18:58
 Time Test Ended: 00:48:28
 Interval: **3144.00 ft (KB) To 3237.00 ft (KB) (TVD)**
 Total Depth: 3237.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Jeff Brown
 Unit No: 67
 Reference Elevations: 2000.00 ft (KB)
 1993.00 ft (CF)
 KB to GR/CF: 7.00 ft

Serial #: **6625** Outside
 Press@RunDepth: 153.88 psig @ 3214.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2013.08.20 End Date: 2013.08.21 Last Calib.: 2013.08.21
 Start Time: 18:28:29 End Time: 00:47:28 Time On Btm: 2013.08.20 @ 20:18:28
 Time Off Btm: 2013.08.20 @ 22:49:58

TEST COMMENT: IFF=Good blow BOB in 13 min
 ISF=Weak surface blow back built to 1/8 in died out in 23-1/2 min
 FFP=Good blow BOB in 7 min
 FSF=Weak surface blow back built to 3/4 in



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1544.87	103.67	Initial Hydro-static
1	53.42	103.46	Open To Flow (1)
31	109.14	104.08	Shut-in(1)
76	865.42	104.49	End Shut-in(1)
76	109.67	104.41	Open To Flow (2)
106	153.88	106.20	Shut-in(2)
151	832.86	105.97	End Shut-in(2)
152	1508.19	106.13	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
62.00	SOCMV 5%O 40%M 55%W	0.60
63.00	SOCGVM 5%O 10%G 25%W 60%M	0.88
94.00	HOCGVM 5%G 5%W 35%O 55%M	1.32
31.00	Gassy Oil 10%G 90%O	0.43
0.00	220-GIP	0.00

Gas Rates

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

*250' total
Flow*

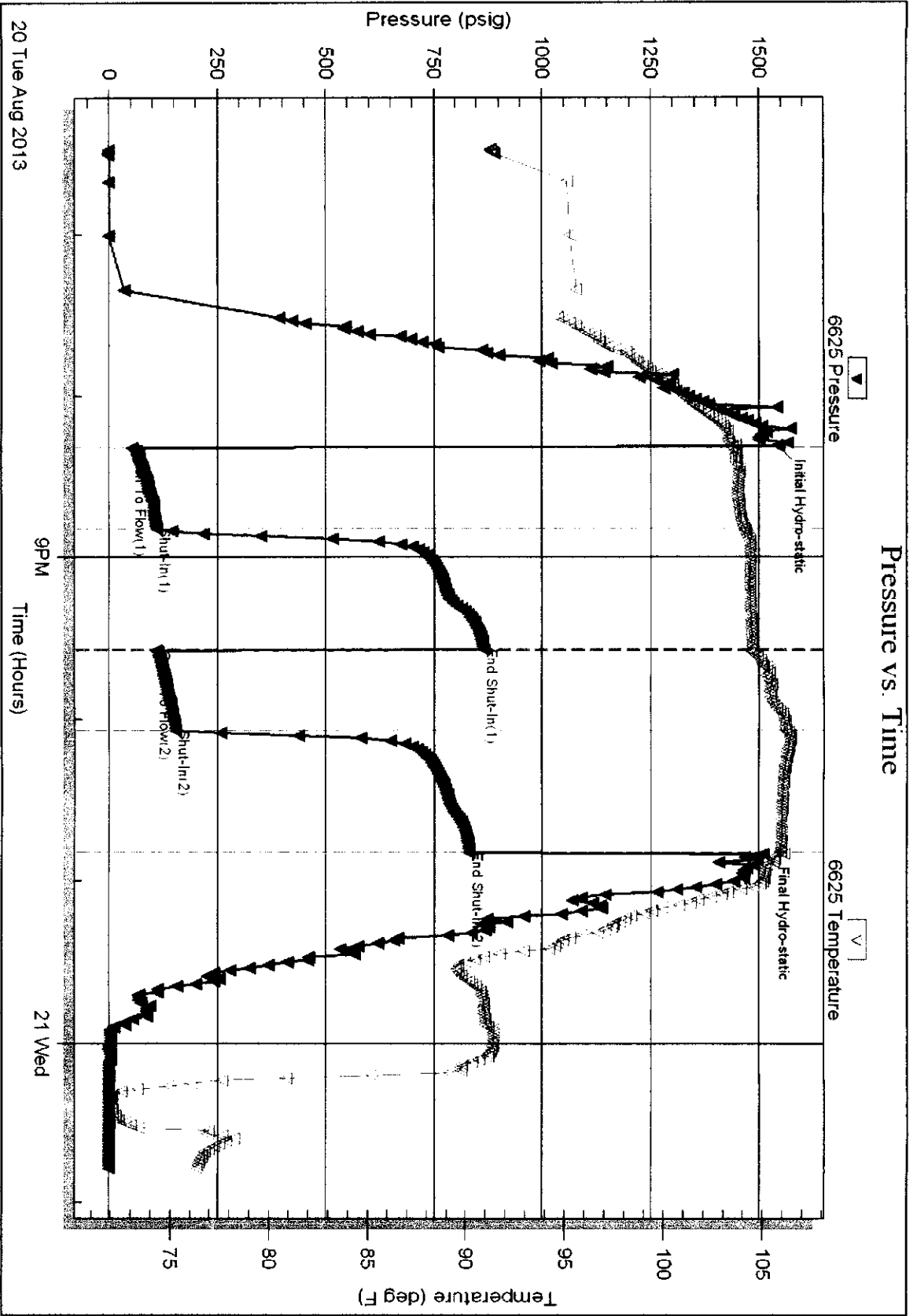
Serial #: 6625

Outside Zinszer Oil Co INC

McClellan #2

DST Test Number: 1

Pressure vs. Time



Triiodide Testing, Inc

Ref. No: 041752

Printed: 2013.08.21 @ 01:11:24

SWIFT



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
8/22/2013	24898

BILL TO
Zinszer Oil Co. Inc. PO Box 211 Hays, KS 67601-0211

58020-01
3350

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#2	McClellan	Rooks	Discovery Drilling...	Oil	Development	LongString	Nick
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				40	Miles	6.00	240.00
578D-L	Pump Charge - Long String - 3430 Feet				1	Job	1,500.00	1,500.00
221	Liquid KCL (Clayfix)				2	Gallon(s)	25.00	50.00T
281	Mud Flush				500	Gallon(s)	1.25	625.00T
290	D-Air				2	Gallon(s)	42.00	84.00T
402-5	5 1/2" Centralizer				6	Each	70.00	420.00T
403-5	5 1/2" Cement Basket				1	Each	285.00	285.00T
406-5	5 1/2" Latch Down Plug & Baffle				1	Each	275.00	275.00T
407-5	5 1/2" Insert Float Shoe With Auto Fill				1	Each	375.00	375.00T
419-5	5 1/2" Rotating Head Rental				1	Each	200.00	200.00T
325	Standard Cement				175	Sacks	14.00	2,450.00T
276	Flocele				50	Lb(s)	2.00	100.00T
283	Salt				900	Lb(s)	0.20	180.00T
284	Calseal				8	Sack(s)	35.00	280.00T
286	Halad-1 (Halad 9)				80	Lb(s)	8.00	640.00T
581D	Service Charge Cement				175	Sacks	2.00	350.00
583D	Drayage				548.5	Ton Miles	1.00	548.50
	Subtotal							8,602.50
	Sales Tax Rooks County						6.15%	366.79
We Appreciate Your Business!						Total	\$8,969.29	

JOB LOG

SWIFT Services, Inc.

DATE 8-22-13 PAGE NO. 1

CUSTOMER Ziassco Oil Co WELL NO. #2 LEASE McClellan JOB TYPE Longstring TICKET NO. 24898

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0400							on loc w/FE
								RTD 3430'
								5 1/2" x 14 # x 3429' x 20'
								Cent 1, 3, 5, 7, 9, 11
								Back 12
	0500							Start FE
	0650							Break Circ
	0705	2	7/4					Plug RH/MA 30/15 sks EA-2
	0715	5	0			200		Start 500 gal Mud Flush
		5	20/0			200		Start 20 bbl KCL Flush
		5	20/0			200		Start 130 sks EA-2
	0733		31					End Cement
								Wash Pth
								Drop LD Plug
	0737	6	0			150		Start Displacement
	0746	5	54			200		Catch Cement
	0751		83			200/1400		Land Plug
								Release Pressure
								Float Hold

Thank you

Nick, David E. & T. SNUL