



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1175389
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
-----------------------------------	-----------------	---

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: _____

1175389

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

Form	ACO1 - Well Completion
Operator	Mai Oil Operations, Inc.
Well Name	Gottschalk 1
Doc ID	1175389

Tops

Name	Top	Datum
Anhydrite	1307	+756
Heebner	3393	-1330
Toronto	3409	-1346
Lansing	3438	-1375
Base Kansas City	3703	-1640
Marmaton	3740	-1677
Conglomerate	3790	-1727
Arbuckle	3855	-1792

JAMES C. MUSGROVE

Petroleum Geologist
212 Main Street
P.O. Box 215
Claflin, KS 67525

Office (620) 588-4250

Res. Claflin (620) 587-3444

Mai Oil Operations
Gottschalk #1
SW-NE-SW-SW
Section 29-16s-19w
Rush County, Kansas
Page 1

Dry and Abandoned

Contractor: Southwind Drilling Co. (Rig #3)
Commenced: September 28, 2013
Completed: October 2, 2013
Elevation: 2063' K.B; 2061' D.F; 2056' G.L.
Casing program: Surface; 8 5/8" @ 998'
Production; none.
Sample: Samples saved and examined 3100' to the Rotary Total Depth.
Drilling time: One (1) foot drilling time recorded and kept 3100 ft to the Rotary Total Depth.
Measurements: All depths measured from the Kelly Bushing.
Formation Tests: None.
Electric Log: None.

<u>Formation</u>	<u>Sample Depth</u>	<u>Sub-Sea Datum</u>
Anhydrite	1307	+756
Base Anhydrite	1346	+717
Heebner	3393	-1330
Toronto	3409	-1346
Lansing	3438	-1375
Base Kansas City	3703	-1640
Marmaton	3740	-1677
Conglomerate	3790	-1727
Arbuckle	3855	-1792
Rotary Total Depth	3875	-1812

(All tops and zones corrected to Electric Log measurements).

SAMPLE ANALYSIS, SHOWS OF OIL, TESTING DATA, ETC.

TOPEKA SECTION

3360-3380' Limestone; cream, tan, fine and medium crystalline, dolomitic in part, questionable stain, no show of free oil and no odor in fresh samples.

LANSING SECTION

- 3438-3703 There were several zones of well developed porosity encountered in the drilling of the Lansing section but the only shows of oil and/or gas was from the following zone.
- 3656-3662' Limestone; white, cream, finely crystalline, slightly oolitic, mostly dense, few sub oomoldic, trace questionable stain, no free oil and no odor in fresh samples.

MARMATON SECTION

- 3740-3790' Varied colored chert and limestone, poorly developed porosity, no shows.

CONGLOMERATE SECTION

- 3790-3855' Varied colored chert and cherty dense limestone in matrix of varied colored shales, (no visible sands).

ARBUCKLE SECTION

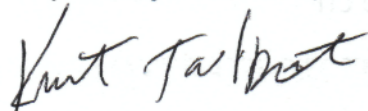
- 3855-3875' Dolomite; cream, white, finely crystalline, few medium crystalline, cherty, few with chalky luster, poor porosity, no shows.

Rotary Total Depth 3875 (-1812)

Recommendations:

The Gottschalk #1 was plugged and abandoned at the Rotary Total Depth 3875'.

Respectfully submitted;



Kurt Talbott,
Petroleum Geologist

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. 7520

Date	9-28-13	Sec.	29	Twp.	16	Range	19	County	Rush	State	KS	On Location		Finish	10:30 AM
------	---------	------	----	------	----	-------	----	--------	------	-------	----	-------------	--	--------	----------

Location Lobanok 15 6w 15 1/2 W N 10

Lease Gratt-Schall Well No. #1 Owner

Contractor Southern #3 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

Hole Size 12 1/4 T.D. 989' Charge To Min Oil

Csg. 8 5/8 Depth 989' 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. 30' Shoe Joint Cement Amount Ordered 41783+2

Meas Line Displace 60 3/4 bbl

EQUIPMENT

Pumptrk 5 No. Cementer, Helper Lorne W Common 240

Bulktrk 12 No. Driver Heath Poz. Mix 160

Bulktrk P11 No. Driver Brett Gel. 8

Calcium 15

JOB SERVICES & REMARKS

Remarks: Hulls

Rat Hole Salt

Mouse Hole Flowseal

Centralizers Kol-Seal

Baskets Mud CLR 48

DV or Port Collar CFL-117 or CD110 CAF 38

Sand

Handling 23

Mileage 23

FLOAT EQUIPMENT

Guide Shoe

Centralizer

Baskets

AFI Inserts

Float Shoe

Latch Down

R. Ring Plug - 1

Pumptrk Charge Long Surface

Mileage 25

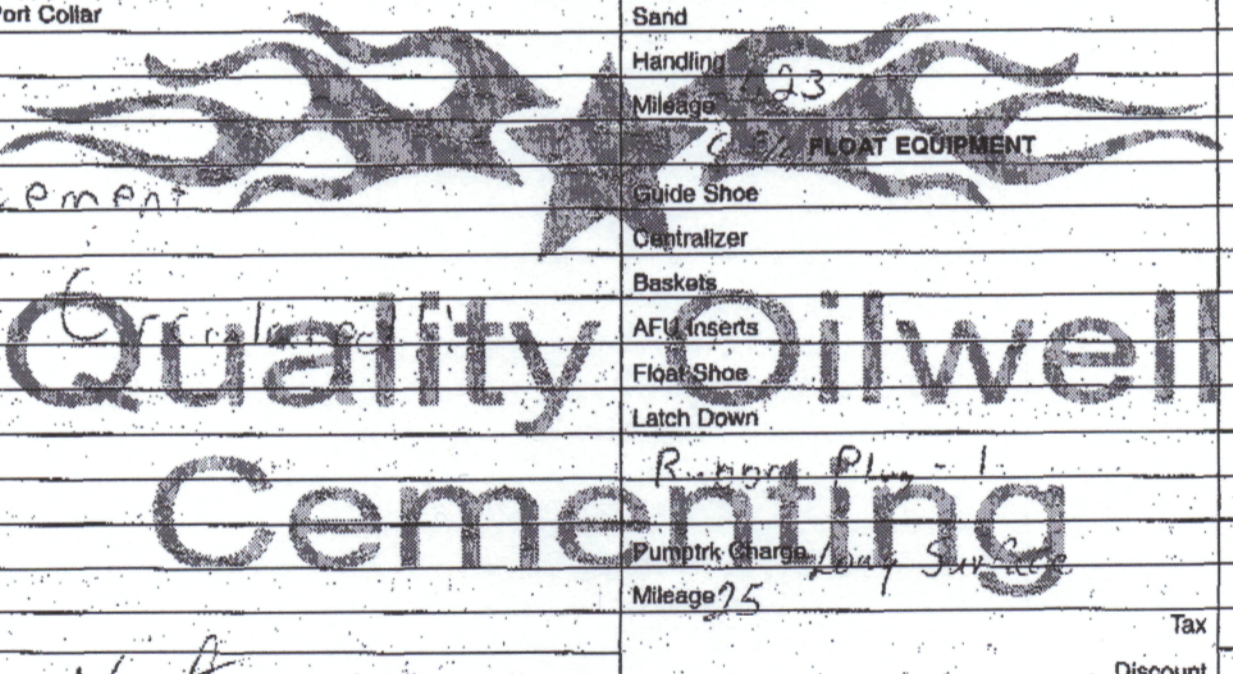
Tax

Discount

Total Charge

X Signature Kant

QUALITY 7854831087 11:37 01/03/2014



ALLIED OIL & GAS SERVICES, LLC 054882

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Russell, KS

DATE <u>10.2.13</u>	SEC. <u>29</u>	TWP. <u>14</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>5:30 AM</u>	JOB FINISH <u>6:30 AM</u>
LEASE <u>Butterfield</u>		WELL # <u>#1</u>		LOCATION <u>Hibenthol, KS</u>		COUNTY <u>Butterfield</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)				<u>15 to Member block top 6 w 15'</u>			

CONTRACTOR Butterfield #3

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D.

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH 3835

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT See "Remarks"

OWNER

CEMENT

AMOUNT ORDERED 25756

60% 41 gal # 1/4 Fl.

COMMON <u>1505L</u>	@ <u>17.9</u>	<u>\$2685.00</u>
POZMIX <u>1005L</u>	@ <u>9.35</u>	<u>\$935.00</u>
GEL <u>8.65L</u>	@ <u>23.4</u>	<u>\$201.24</u>
CHLORIDE	@	
ASC	@	
<u>Flt Seal 2</u>	@	
<u># 5016</u>	@ <u>2.77</u>	<u>\$143.50</u>
	@	
	@	
	@	
	@	
HANDLING <u>267.67</u>	@ <u>1/3</u>	<u>\$2.40</u>
MILEAGE <u>2103.98</u>	@ <u>1/2</u>	<u>\$663.81</u>
	@ <u>2.60</u>	<u>\$699.19</u>

TOTAL \$5332.75

EQUIPMENT

PUMP TRUCK CEMENTER Don P

401 HELPER Nathan D

BULK TRUCK

473 DRIVER Jesse C

BULK TRUCK

DRIVER

REMARKS:

P1 = 3835 @ 5.05L = 8.21 ^{hr}/_{min}

D. Seal - 5.5 ^{hr}/_{min}

P2 = 1400 @ 5.05L = 8.21 ^{hr}/_{min}

D. Seal - 16.62 ^{hr}/_{min}

P3 = 990 @ 5.05L = 7.21 ^{hr}/_{min}

D. Seal - 10.19 ^{hr}/_{min}

P4 = 510 @ 5.05L = 8.21 ^{hr}/_{min}

D. Seal - 3.97 ^{hr}/_{min}

P5 = 600 @ 2.05L = 3.23 ^{hr}/_{min} cement to Surface

1x 8 3/8 wire out - cement to Surface

SERVICE

DEPTH OF JOB 3835'

PUMP TRUCK CHARGE \$2,600.47

EXTRA FOOTAGE @

MILEAGE Heavy 24m @ 7.70 \$184.80

MANIFOLD light 24m @ 4.40 \$105.60

TOTAL \$2,890.87

PLUG & FLOAT EQUIPMENT

1x 8 3/8 wire Plug @ \$107.64

TOTAL \$107.64

CHARGE TO: Ma. Oil

STREET

CITY STATE ZIP

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 Joy K. Huff

SIGNATURE Joy K. Huff

SALES TAX (If Any)

TOTAL CHARGES \$8,331.26

DISCOUNT \$2,055.90 IF PAID IN 30 DAYS