



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1179013
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: _____

1179013

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: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 264546

Invoice Date: 12/06/2013 Terms: 0/0/30,n/30

Page 1

D & Z EXPLORATION
901 N. ELM ST.
P.O. BOX 159
ST. ELMO IL 62458
(618) 829-3274

GARDNER HOLDING D-1
44943
SW 28-14-22
12-04-2013
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	143.00	11.5000	1644.50
1118B	PREMIUM GEL / BENTONITE	340.00	.2200	74.80
1111	SODIUM CHLORIDE (GRANULA	276.00	.3900	107.64
1110A	KOL SEAL (50# BAG)	715.00	.4600	328.90
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50
4102	CEMENT BASKET 2 1/2"	1.00	205.0000	205.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	1085.00	1085.00
368 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.20	126.00
368 CASING FOOTAGE	1161.85	.00	.00
510 MIN. BULK DELIVERY	1.00	368.00	368.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00

Parts: 2390.34 Freight: .00 Tax: 176.30 AR 4325.64
 Labor: .00 Misc: .00 Total: 4325.64
 Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____



CONSOLIDATED
Oil Well Services, LLC

264546

TICKET NUMBER 44943
LOCATION Ottawa
FOREMAN Alan Maden

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-4-13	3392	Gardner Holding D-1	SW 28	14	22	To
CUSTOMER		TRUCK #				
D+2 Exploration		730	Ala Mad	Safety Meet		
MAILING ADDRESS		DRIVER				
901 W Elm P.O. box 159		368	Ar Mad			
CITY	STATE	ZIP CODE	MIX PSI			
St Elmo	IL	62458	675	Milk. Sta.		
			510	Set Tul		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 1200 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 1166.85 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 6 3/4 DISPLACEMENT PSI 800 MIX PSI 200 RATE 46pm

REMARKS: Held meeting. Established rate down casing. Loaded casing from pit. Broke circulation. Mixed & pumped 100# gel. Circulated gel to surface from pit. Mixed and pumped 143 sk 50 150 cement plus 270 gel, 5% salt, 5# Kol seal per sack. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PST. Set float closed valve.

TOS, Chad

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
3401	1	PUMP CHARGE	368	1085 ⁰⁰	
3406	30	MILEAGE	368	126 ⁰⁰	
3402	1166.85	Casing footage	368	-	
3407	min	ten miles	510	368 ⁰⁰	
5502C	2	80 val	675	180 ⁰⁰	
1124	143 sk	50.150 cement		1644.50	
1118B	340 #	gel		74.80	
1111	276 #	salt		107.64	
1110A	715 #	Kol seal		328.90	
4402	1	2 1/2 plug		29.00	
4102	1	2 1/2 basket		205 ⁰⁰	
				SALES TAX	176.30
				ESTIMATED TOTAL	4325.64

completed

Ravin 3737

AUTHORIZATION *Alan Maden* TITLE _____ DATE _____

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

Johnson County, KS
Well: Gardner Holding D1
Lease Owner: D Z

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
12-02-2013

WELL LOG

Thickness of Strata	Formation	Total Depth
30	soil/clay	30
13	shale	43
5	lime	48
3	shale	51
16	lime	67
9	shale	76
8	lime	84
9	shale	93
25	lime	118
12	shale	130
19	lime	149
7	shale	156
57	lime	213
20	shale	233
9	lime	242
18	shale	260
5	lime	265
5	shale	270
8	lime	278
47	shale	325
25	lime	350
6	shale	356
23	lime	379
5	shale	384
5	lime	389
5	shale	394
6	lime	400
116	shale	516
7	sand	523
50	shale	573
3	lime	576
4	shale	580
2	lime	582
6	shale	588
8	lime	596
17	shale	613
3	lime	616
3	shale	619
10	lime	629
30	shale	659

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals $D^2 \times 14 \times h$
 D equals diameter in feet.
 h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

- * D - Diameter of Pump Sheave
- * d - Diameter of Engine Sheave
- SPM - Strokes per minute
- RPM - Engine Speed
- R - Gear Box Ratio
- *C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times D$

R - $RPM \times D$ over $SPM \times d$

$$BELT LENGTH - 2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$$

* Need these to figure belt length

$$TO FIGURE AMPS: \frac{WATTS}{VOLTS} = AMPS$$

746 WATTS equal 1 HP

Log Book

Well No. 01

Farm Gardner Holdings

KS Johnson
 (State) (County)

28 14 22
 (Section) (Township) (Range)

For D+2 Exploration
 (Well Owner)

**Town Oilfield
 Services, Inc.**
 1207 N. 1st East
 Louisburg, KS 66053
 913-710-5400

Gardner Holdings Johnson County

KS State; Well No. 01

Elevation 1023

Commenced Spuding 12-2 20 13

Finished Drilling 12-4 20 13

Driller's Name Chad Weaver

Driller's Name

Driller's Name

Tool Dresser's Name Cole Holcom

Tool Dresser's Name

Tool Dresser's Name

Contractor's Name OS

28 14 22

(Section) (Township) (Range)

Distance from S line, 2620 ft.

Distance from E line, 2980 ft.

3 Sacks
CASING AND TUBING
RECORD

10" Set _____ 10" Pulled _____

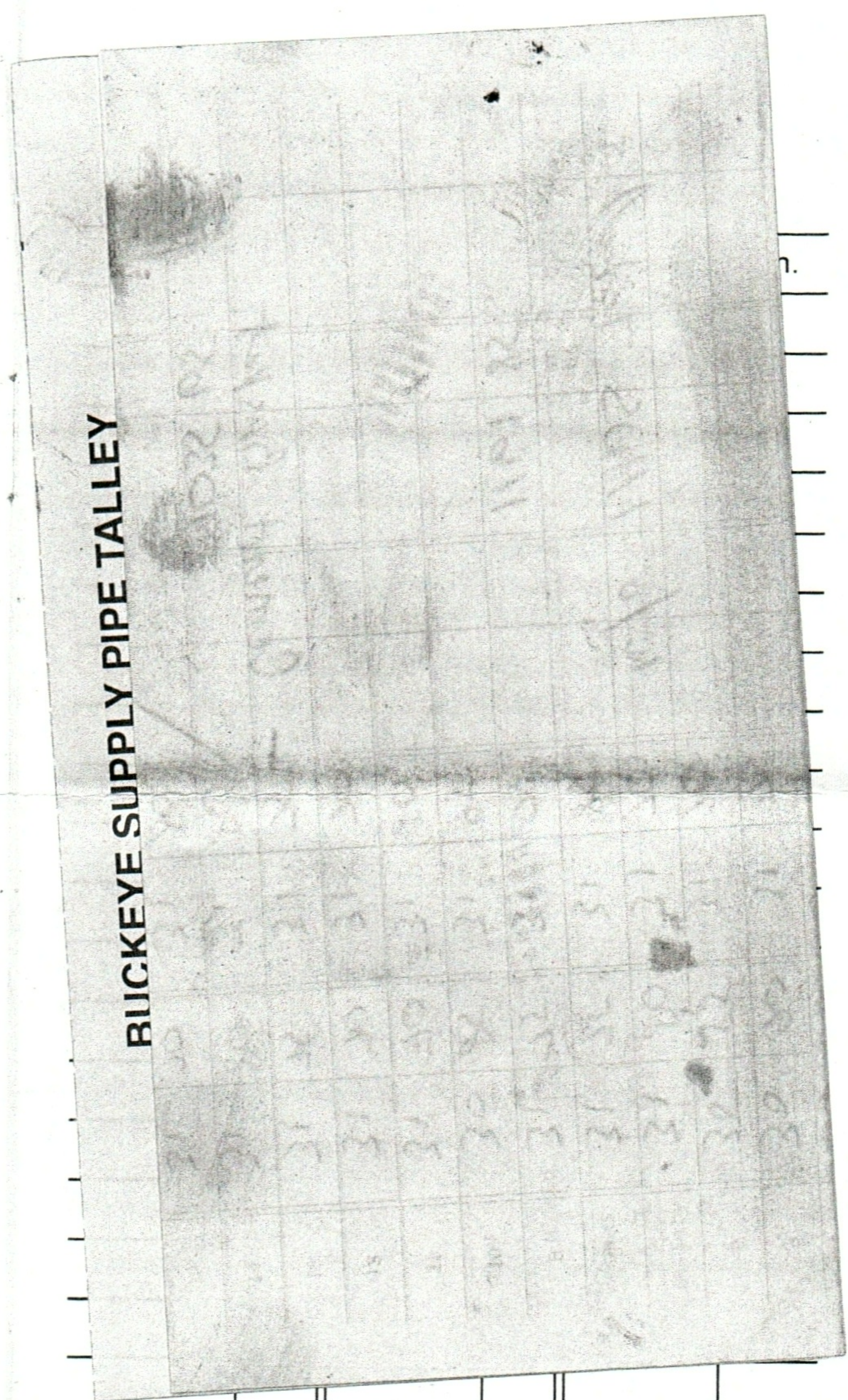
7 7/8" Set 24 8" Pulled _____

6 1/4" Set _____ 6 1/4" Pulled _____

4" Set _____ 4" Pulled _____

2 7/8" Set 1161.85 2" Pulled _____

1035.65 Cement Basket
1200 TO



Thickness of Strata	Formation	Total Depth	Remarks
30	soil / clay	30	
13	shale	43	
5	Lime	48	
3	shale	51	
16	Lime	67	
9	shale	76	
8	Lime	84	
9	shale	93	
25	Lime	118	
12	shale	130	
19	Lime	149	
7	shale	156	
57	Lime	213	
20	shale	233	
9	Lime	242	
18	shale	260	
5	Lime	265	
5	shale	270	
8	Lime	278	
47	shale	325	
25	Lime	350	
6	shale	356	
23	Lime	379	
5	shale	384	
5	Lime	389	
5	shale	394	
6	Lime	400	
			Harder

Thickness of Strata	Formation	Total Depth	Remarks
116	shale	516	
7	sand	523	gray, no oil
50	shale	573	
3	Lime	576	
4	shale	580	
2	Lime	582	
6	shale	588	
8	Lime	596	
17	shale	613	
3	Lime	616	
3	shale	619	
10	Lime	629	
30	shale	659	red bed - 632'
2	Lime	661	
5	shale	666	gray, no oil
19	sand	685	
10	sandy shale	695	
41	shale	736	
5	sand	741	odor, very little oil
3	Broken sand	744	
110	shale	854	
3	sandy Lime	857	with oil, good bleeding
6	sand	863	oil sand
2	Broken sand	865	with oil
4	sandy shale	869	
50	shale	919	
11	sand	930	gray-white sand, no oil

