

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1185227

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 🗌 East 🗌 West
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
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: Well #:
New Well Re-Entry Workover	Field Name:
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:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: sx cmt.
□ Deepening □ Re-perf. □ Conv. to ENHR □ Conv. to SWD □ Plug Back □ Conv. to GSW □ Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Dual Completion Permit #:	
SWD Permit #: ENHR Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	QuarterSec. TwpS. 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:							

Page Two



Operator Name:				_ Lease l	Name: _			Well #:		
Sec Twp	S. R	East V	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	itic pressures, bot d.	tom hole temp	erature, flui	d recovery,
Final Radioactivity Lo- files must be submitte						gs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log
Drill Stem Tests Taker (Attach Additional S		Yes	No				on (Top), Depth ar			mple
Samples Sent to Geo	logical Survey	Yes	☐ No		Nam	e		Тор	Da	tum
Cores Taken Electric Log Run		☐ Yes ☐ Yes	☐ No ☐ No							
List All E. Logs Run:										
			CASING		☐ Ne					
	0: 11-1-	· ·				ermediate, product		# O	T	d Damasat
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used		d Percent itives
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used		Type and F	ercent Additives		
Perforate Protect Casing										
Plug Back TD Plug Off Zone										
Did you perform a hydrau	•					Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to							= :	p question 3)	of the ACO	()
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemicai d	isciosure re	gistry?	Yes	No (If No, fill	out Page Three	or the ACO-1	<i>)</i>
Shots Per Foot		ION RECORD - I Footage of Each I					cture, Shot, Cement mount and Kind of Ma		d	Depth
TUBING RECORD:	Size:	Set At:		Packer A	i:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or Ef	NHR. Prod	ducing Meth	ıod:		1				
			Flowing	Pumpin	g	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls. (Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		M	METHOD OF	COMPLE	ETION:		PRODUCTION	ON INTERVA	
Vented Sold		Open		Perf.	Dually	Comp. Cor	mmingled			
	bmit ACO-18.)		(Specify)		(Submit)	ACO-5) (Sub	mit ACO-4)			

Form	ACO1 - Well Completion						
Operator	La Veta Oil & Gas, LLC						
Well Name	Vinita Gatton 4						
Doc ID	1185227						

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Cement		Type and Percent Additives
Surface	12.25	8.625	24	226	60/40	340	comm 3%
Production	7.875	5.5	15	3669	AAZ	150	10% salt



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

1718 09877 A

	PRESSURE PUMP	PING & WIRELINE	7			DATE	TICKET NO	redi "Li espesa) Venedo prelivi	Twenty I		
DATE OF /- 2	4/40	DISTRICT PAT	165	NEW	NEW OLD PROD INJ WDW CUSTOMER ORDER NO.:						
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CITY STATE					REW	GIN	re CAAn	PAT	7		
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FIELD SERVICE ORDER NO.

DONDLEY

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:



-	FIELD SERVICE TICKET
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	CONTENUATION
	10451 10 19877 14

DATE OF 1-2	24-14 DI	STRICT FOATS	1/25	NEW WELL	OLD P	PROD INJ	□ WDW [,/	TOMER DER NO.:	7
CUSTOMER	AVETH	OR & G	AS L	C LEASE	一一	ION	77	/	WELL NO.	23%
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SERVICE REPRESENTATIVE

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY

(WELL OWNER OPERATOR CONTRACTOR OF AGENT)

TREATMENT REPORT

Date

Taylor Printing, Inc. 620-672-3656

Customer Lease Children Size Strong Performent Casing Strong Station Physe Job Chois/Ft Fluid Size Shots/Ft Full USE Casing Strong Size Shots/Ft Strong Size Strong Size Shots/Ft Strong Size Strong Size

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Invoice

Date	Invoice #
1/27/2014	9305

1308 Schwaller Ave. Hays, KS 67601 785-625-3531

Bill To
La Veta Oil & Gas, LLC
P.O. Box 780
Middleburg, VA 20118-0780

Delivery #	Terms		Due Dat	te	Contractor	Credit #	Lea	Lease		Legal	
8363	Net 30		2/26/201		4 Pet2 7693		Gatto	Gatton #4		Stafford 29-22-11	
Quantity	Serviced	Ite	m Code			Description		Price E	ach	Amount	
<u> </u>	Serviced 1/17/2014	Prem Cotto Soda	nium Gel onseed Ash stic Soda ite coac A	Co Soc Car Lig Lin Dri PH 109	emium Gel - ttonseed Hul da Ash ustic Soda gnite	100 pound bag	g g	3: 2: -6	ach 19.95 23.95 28.95 66.55 26.00 12.95 58.00 80.00 79.43 95.00	Amount 3,850.35 526.90 376.35 465.85 182.00 38.85 1,074.00 280.00 -679.43 1,895.00	
Thank you for y	our business.						To	otal		\$8,009.87	