



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1189532
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: _____

1189532

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
--	---

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
----------------	-------	---------	------------	---

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> _____
---	--

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: _____ _____
--	--	---

802 N. Industrial Rd.
 P.O. Box 664
 Iola, Kansas 66719
 Phone: (620) 365-5588

Payless Concrete Products, Inc.



CONDITIONS
 Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery at owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allowed time for unloading trucks is 20 minutes per vehicle. Any time over this limit will be charged at the rate of \$100.00 per hour. Vehicle weight contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request.
NOTICE TO OWNER
 Failure of this contractor to pay those persons supplying material or services to complete the contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

ARR001
 A & A WELL SERVICE
 4500 CONNECTICUT RD
 ELSMERE KS
 66732

AA10/17
 A&A WELL SERVICE
 54 E TO 59 HWY S 10 MI TO
 CONNECTICUT EAST 2 MI TO 4600
 S 1 MI TO CALIFORNIA EAST
 1/2 MI N SD

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	YARDS DEL	BATCH#	DRIVER/TRUCK	WATER TRIM	SLUMP	TICKET NUMBER	PLANT/TRANSACTION #
01:29:10P	WELL	10.00 yd	10.00 yd	10.00 yd	0.00	35	0.0	4.00 in	ALLCO	
10-17-13					25421	6/yd			35296	

WARNING
 IRRITATING TO THE SKIN AND EYES

Contains Portland Cement, Water Reducers, Bores and Gases. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water. If Irritation Persists, Get Medical Attention. KEEP CHILDREN AWAY.

CONCRETE is a PERISHABLE COMMODITY and BECOMES THE PROPERTY OF THE PURCHASER UPON LEAVING THE PLANT. ANY CHANGES ON CANCELLATION OF ORIGINAL INSTRUCTIONS MUST BE TELEPHONED TO THE OFFICE BEFORE LOADING STARTS.

The undersigned promises to pay, all costs, including reasonable attorney's fees, incurred in collecting any sums owed.
 All accounts not paid within 30 days of delivery will bear interest at the rate of 2 1/2% per annum.
 Not Responsible for Residue, Aggregate or Color Quality. No Claim Allowed Unless Made at Time Material is Delivered.
 A \$25 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.
 Excess Delay Time Charged @ \$50/Hr.

PROPERTY DAMAGE RELEASE
 (TO BE SIGNED BY DRIVER TO BE MADE INSIDE CURB LINE)
 Dear Customer: The driver of the truck in presenting this RELEASE to you for your signature is of the opinion that the size and weight of the truck is such that it is difficult to maneuver in tight spaces. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE relieving him and this supplier from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc. by the delivery of the material, and that you also agree to help him remove mud from the wheels of his vehicle so that he will not tire the public street. Further, as additional consideration of the truck, the driver agrees to pay for any and all damages to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.
 SIGNED _____

Excessive Water Is Detrimental to Concrete Performance
 H₂O Added By Request/Authorized By
 GAL X _____
 WEIGHMASTER
 NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.
 LOAD RECEIVED BY: _____

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE															
10.00	WELL	WELL (10 SACKS PER UNIT)	55.00	550.00															
10.00	MIX & HBL	MIXING & HAULING	25.00	250.00															
2.50	TRUCKING	TRUCKING CHARGE	55.00	137.50															
<table border="0"> <tr> <td>RETURNED TO PLANT</td> <td>LEFT JOB</td> <td>FINISH UNLOADING</td> <td>DELAY EXPLANATION (CYLINDER TEST TAKEN)</td> <td>TIME ALLOWED</td> </tr> <tr> <td></td> <td></td> <td></td> <td> 1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER </td> <td> Cab Total \$ 937.50 Tax \$ 7.400 69.38 Total \$ 1006.88 Order # 1006.88 </td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td> ADDITIONAL CHARGE 1 _____ ADDITIONAL CHARGE 2 _____ GRAND TOTAL </td> </tr> </table>					RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION (CYLINDER TEST TAKEN)	TIME ALLOWED				1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	Cab Total \$ 937.50 Tax \$ 7.400 69.38 Total \$ 1006.88 Order # 1006.88					ADDITIONAL CHARGE 1 _____ ADDITIONAL CHARGE 2 _____ GRAND TOTAL
RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION (CYLINDER TEST TAKEN)	TIME ALLOWED															
			1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	Cab Total \$ 937.50 Tax \$ 7.400 69.38 Total \$ 1006.88 Order # 1006.88															
				ADDITIONAL CHARGE 1 _____ ADDITIONAL CHARGE 2 _____ GRAND TOTAL															

A&A WELL SERVICES, INC.
4500 CONNECTICUT RD.
ELSMORE, KS 66732

NELSON N-1-13

0	top soil clay	6
6	lime	50
50	shale	51
51	lime	55
55	shale	63
63	lime	66
66	shale	72
72	lime/shale streaks	178
178	shale	293
293	lime	327
327	shale	386
386	lime	389
389	shale	394
394	lime	419
419	shale	427
427	bern lime	435
435	shale	452
452	lime	456
456	shale	463
463	lime	482
482	shale	484
484	lime	485
485	shale	491
491	lime	495
495	shale	504
500	sandy shale	560
560	lime	562
562	shale	598
598	coal	600
650	shale	652
652	sandy shale	658
658	core #1	678
678	sandy shale	683
683	core #2	702
702	sandy shale	708
708	shale	734
734	lime	736
736	shale	740