

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1191172

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:			Sec.	TwpS. R	East _ West	
Address 2:			F6	eet from North /	South Line of Section	
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section	
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:	
Phone: ()			□ NE □ NW	V □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 #:			
	e-Entry	Workover	Field Name:			
			Producing Formation:			
☐ Oil ☐ WSW	☐ SWD	☐ SIOW	Elevation: Ground: Kelly Bushing:			
Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):			Total Vertical Depth: Plug Back Total Depth: Feet			
						Multiple Stage Cementing Collar Used? Yes No
			If Workover/Re-entry: Old Well I			If yes, show depth set:
Operator:			If Alternate II completion, c	cement circulated from:		
Well Name:			feet depth to:	w/	sx cmt.	
Original Comp. Date:						
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan		
Plug Back	Conv. to G		(Data must be collected from to			
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls	
Dual Completion			Dewatering method used:_			
SWD			Location of fluid disposal if	hauled offsite:		
ENHR	Permit #:					
GSW Permit #:			Operator Name:			
			Lease Name:			
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East West	
Recompletion Date		Recompletion Date	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 I II Approved by: Date:				

Page Two



Operator Name:			L	ease Name: _			Well #:	
Sec Twp	S. R	East We	est C	County:				
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres	sures, whether sh	ut-in pressur	e reached stati	c level, hydrosta	tic pressures, bott		rval tested, time tool erature, fluid recovery,
Final Radioactivity Lo files must be submitted					ogs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taker (Attach Additional		Yes	No	L	_	on (Top), Depth an		Sample
Samples Sent to Geo	logical Survey	Yes	No	Nam	e		Тор	Datum
Cores Taken ☐ Yes ☐ No Electric Log Run ☐ Yes ☐ No			7					
List All E. Logs Run:								
		(CASING REC	ORD Ne	ew Used			
		· ·		ıctor, surface, inte	ermediate, producti	1		I
Purpose of String	Size Hole Drilled	Size Casin Set (In O.D		Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
		ADD	ITIONAL CEN	MENTING / SQL	JEEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cem	ent #	# Sacks Used Type and Percent Additives				
Perforate Protect Casing	100 20111111							
Plug Back TD Plug Off Zone								
1 lag on zono								
Did you perform a hydrau	ulic fracturing treatment	on this well?			Yes	No (If No, ski	o questions 2 ar	nd 3)
Does the volume of the to		•				_ ` ` '	p question 3)	
Was the hydraulic fractur	ing treatment information	on submitted to the c	hemical disclo	sure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)
Shots Per Foot PERFORATION RECORD - Bridge Plu Specify Footage of Each Interval Pe				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth				
	, ,				,		,	·
TUBING RECORD:	Size:	Set At:	Pa	acker At:	Liner Run:			
						Yes No		
Date of First, Resumed Production, SWD or ENHR. Producing Met Flowing				Pumping	Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. G	as Mcf	Wate	er Bi	ols. G	as-Oil Ratio	Gravity
DIODOCITI	ON OF CAS:		N 4 - T - 1		TION:		PROPUSTIC	ON INTERVAL.
Vented Solo	ON OF GAS: Used on Lease	Open Ho		IOD OF COMPLE \Box		nmingled	PRODUCTION	ON INTERVAL:
	bmit ACO-18.)	Other (S	necify)	(Submit		mit ACO-4)		

PLEASE REFER TO INVOICE NUMBER ON ALL CORRESPONDENCE INVOICE Customer Copy

11:42:13

Due Date: 12/08/13

Invoice Date: 11/04/13 Ship Date: 11/04/13

Invoice: 10204522

25.8697\$

JATOT

GARNETT TRUE VALUE HOMECENTER

410 N Maple Garnett, KS 66032

2526 N FUNSTON

% TOM MILLER

Sold To: MILLER ENERGY LLC

Sale rep #: JIM

Instructions :

Page: 1

Special

8517-844 {785} XAF 0017-844 {887}

60.742	Sales tax	64.151.43 P.151.43 0.00 aldaxable # xs	N	AIV 9IH2	
£4.1317\$	Istot səls2		CHECKED BY DATE SHIPPED DRIVER	EILLED BY	
2767.05 4384.38	1	moU/eoirq IIA 6.4500 8A6 9.4900 8A6 9.4900 BA6 OPJ# P	DESCRIPTION FLY ASH MIX 80 LBS PER BAG PORTLAND CEMENT-94#) P BAG CPFA	ORDER SHIP 429.00 429.00 462.00 462.00
HT8 0£1 T	r0gmiqoq	1			
		Order By:	Customer PO:	ar #: 00020002	Custome
			7599-964 (029)	IOLA, KS 66749	-

2299-964 (029)

Ship To: MILLER ENERGY LLC

Acct rep code:

2 - Customer Copy



R.J. Enterprises 22082 NE Neosho RD Garnett, KS 66032

Miller 6-I

			Start 9-23-2013
1	soil	1	Finish 9-24-2013
2	clay/rock	3	
15	lime	18	
155	shale	173	
38	lime	211	
67	shale	278	
21	lime	299	
8	shale	307	set 20' 7"
23	lime	330	ran 822' 2 7/8
8	shale	338	cemented to surface 78 sxs
21	lime	359	v.
6	shale	365	
21	lime	386	
173	shale	559	
23	lime	582	
63	shale	645	
27	lime	672	
24	shale	696	
7	lime	703	
17	shale	720	
8	lime	728	
8	shale	736	
7	lime	743	
12	shale	755	
12	sandy shale	767	odor
25	Bkn sand	792	good show
2	Dk sand	794	show
34	shale	828	T.D.