



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1191979  
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: \_\_\_\_\_

1191979

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
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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
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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> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	LB Exploration, Inc.
Well Name	Spencer's Bluffs 5
Doc ID	1191979

All Electric Logs Run

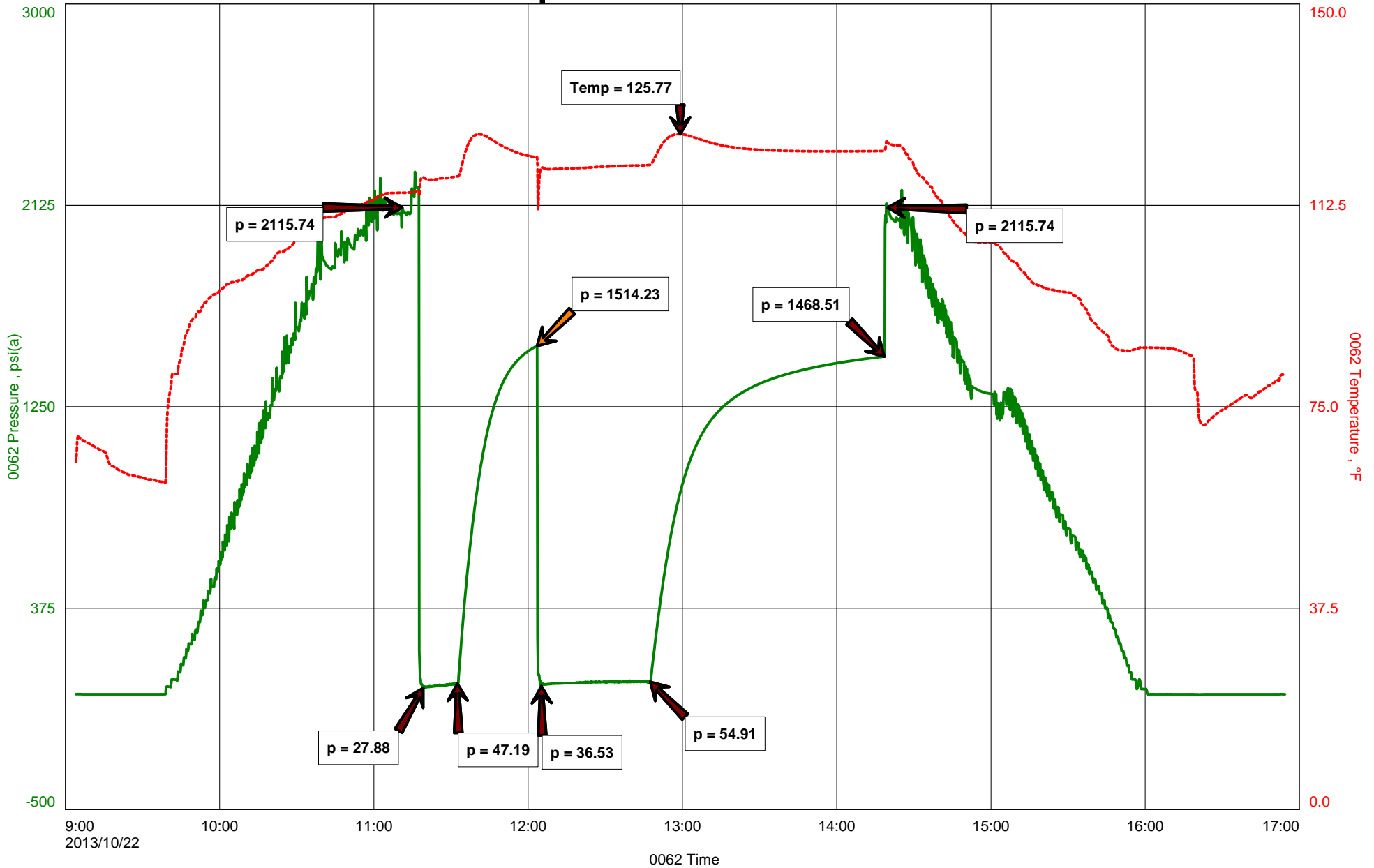
Dual Compensated Porosity
Dual Induction
Microresistivity
Borehole Compensated Sonic



LB Exploration Inc.  
DST #1 Mississippian 4396' - 4445'  
Start Test Date: 2013/10/22  
Final Test Date: 2013/10/22

Spencer's Bluffs #5  
Formation: Mississippian 4396' - 4445'  
Pool: NA  
Job Number: F188

# Spencer's Bluffs #5





# Diamond Testing General Report

**JAKE  
FAHRENBRUCH - TESTER  
Cell: (620) 282-8977**

P.O. Box 157  
Hoisington KS 67544  
Office: (800) 542-7313

## General Information

<b>Company Name</b>	LB Exploration Inc.	<b>Well Name</b>	Spencer's Bluffs #5
<b>Well Operator</b>	LB Exploration Inc.	<b>Unique Well ID</b>	DST #1 Mississippian 4396' - 4445'
<b>Contact</b>	Michael Petermann	<b>Surface Location</b>	Sec 22-32s-13w-Barber Co.-KS
<b>Site Contact</b>	Steven Petermann	<b>Test Unit</b>	#5
<b>Field</b>	Brooks - Younger	<b>Pool</b>	NA
<b>Well Type</b>	Vertical	<b>Job Number</b>	F188
<b>Prepared By</b>	Jake Fahrenbruch	<b>Qualified By</b>	Steven Petermann

## Test Information

<b>Test Type</b>	Bottom-Hole (no special equip)	<b>Test Purpose</b>	Initial Test
<b>Formation</b>	Mississippian 4396' - 4445'	<b>Gauge Name</b>	0062
<b>Start Test Date</b>	2013/10/22	<b>Start Test Time</b>	09:04:00
<b>Final Test Date</b>	2013/10/22	<b>Final Test Time</b>	16:54:00

## Test Results

15 minute initial flow period:	Strong blow @ B.O.B. in 20 seconds.
30 minute initial shut-in period:	Gas to surface while bleeding off, no blow-back.
45 minute final flow period:	Strong blow @ B.O.B. immediately, gauged gas and recovered a gas sample.
90 minute final shut-in period:	Bled off, no blow-back.

**GAS FLOW RATES:**

2nd flow period	
1 min	.25" choke 14 psi 37,600 cf/d
10 min	.25" choke 13 psi 35,900 cf/d
20 min	.25" choke 12 psi 34,000 cf/d
30 min	.25" choke 11 psi 32,400 cf/d
40 min	.25" choke 11 psi 32,400 cf/d
45 min	.25" choke 10.5 psi 31,600 cf/d

**RECOVERED:**

25'	Drilling Mud	100% mud
65'	SOCM	5% oil, 95% mud
----	Total Recovered Fluid: 90'	
----	Tool Sample: SOCM 7% oil, 93% mud	
----	Gas in all fluid free pipe.	
----	Bottom-Hole Temp: 126 Deg F	

**Pressures:**

IHP:	2116
IFP:	28 - 47
ISIP:	1514
FFP:	37 - 55
FSIP:	1469
FHP:	2116

Thanks!



**DIAMOND TESTING**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(800) 542-7313  
**DRILL-STEM TEST TICKET**  
FILE: SPENBLUF5DST1

TIME ON: 9:04 AM  
TIME OFF: 4:54 PM

Company LB Exploration Inc. Lease & Well No. Spencer's Bluffs #5  
Contractor Ninnescah Drilling Rig #101 Charge to LB Exploration Inc.  
Elevation 1680' KB Formation Mississippian Effective Pay \_\_\_\_\_ Ft. Ticket No. F188  
Date 10-22-13 Sec. 22 Twp. \_\_\_\_\_ 32 S Range \_\_\_\_\_ 13 W County \_\_\_\_\_ Barber State KANSAS  
Test Approved By Steven Petermann Diamond Representative Jake Fahrenbruch

Formation Test No. ONE Interval Tested from 4396 ft. to 4445 ft. Total Depth 4445 ft.  
Packer Depth 4391 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
Packer Depth 4396 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
Depth of Selective Zone Set \_\_\_\_\_

Top Recorder Depth (Inside) 4382 ft. Recorder Number 0062 Cap. 5,000 P.S.I.  
Bottom Recorder Depth (Outside) 4404 ft. Recorder Number 5951 Cap. 5,000 P.S.I.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type Chemical Viscosity 65 Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
Weight 9.3 Water Loss 8.8 cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
Chlorides (4.5# LCM) 5000 P.P.M. Drill Pipe Length 4371 ft. I.D. 3 1/2 in.  
Jars: Make STERLING Serial Number \_\_\_\_\_ Test Tool Length 25 ft. Tool Size 3 1/2-IF in.  
Did Well Flow? GTS Reversed Out NO Anchor Length 49 ft. Size 4 1/2-FH in.  
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. <sup>15' PERF (7' TOP, 8' BTM)</sup> Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: Strong blow @ B.O.B. in 20 seconds. G.T.S. while bleeding off, no blow-back.  
2nd Open: Strong blow @ B.O.B. immediately, guage gas, recovered gas sample. Bled off, no blow-back.

Recovered \_\_\_\_\_ ft. of Total Recovered Fluid: 90'  
Recovered 25 ft. of Drilling Mud 100% mud  
Recovered 65 ft. of SOCM 5% oil, 95% mud  
Recovered \_\_\_\_\_ ft. of Tool Sample: SOCM 7% oil, 93% mud

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
_____	Total

Time Set Packer(s) 11:17 AM A.M. P.M. Time Started Off Bottom 2:17 PM A.M. P.M. Maximum Temperature 126 Deg F

Initial Hydrostatic Pressure..... (A) 2116 P.S.I.  
Initial Flow Period..... Minutes 15 (B) 28 P.S.I. to (C) 47 P.S.I.  
Initial Closed In Period..... Minutes 30 (D) 1514 P.S.I.  
Final Flow Period..... Minutes 45 (E) 37 P.S.I. to (F) 55 P.S.I.  
Final Closed In Period..... Minutes 90 (G) 1469 P.S.I.  
Final Hydrostatic Pressure..... (H) 2116 P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

# QUALITY WELL SERVICE, INC.

6030

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Office 620-727-3410  
Fax 620-672-3663

Rich's Cell 620-727-3409  
Brady's Cell 620-727-6964

Date	10-16-13	Sec.	22	Twp.	32	Range	13	County	Barber	State	Ks	On Location	6:00	Finish	9:00 pm
Lease	Springs Bluffs		Well No.	5		Location									
Contractor	Dinnesch		Medicine + 160 SW 25 1/2 W 1/2 S												
Type Job	Surface		Owner To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.												
Hole Size	12 1/4		T.D.		Charge To										
Csg.	8 7/8		Depth		311.50		To AB Exploration								
Tbg. Size			Depth		Street										
Tool			Depth		City										
Cement Left in Csg.	20		Shoe Joint		15		State								
Meas Line			Displace		19.4 bbl/s		The above was done to satisfaction and supervision of owner agent or contractor.								
<b>EQUIPMENT</b>										Cement Amount Ordered 320 sx 60/40 2% gal					
Pumptrk	6	No.			3% CC 180 1/4 C.F. / Used 300 sx.										
Bulktrk	5	No.			Common 120										
Bulktrk		No.			Poz. Mix 5										
Pickup		No.			Gel. 11										
<b>JOB SERVICES &amp; REMARKS</b>										Calcium					
Rat Hole					Hulls										
Mouse Hole					Salt 75										
Centralizers					Flowseal										
Baskets					Kol-Seal										
D/V or Port Collar					Mud CLR 48										
					CFL-117 or CD110 CAF 38										
					Sand 337										
					Handling 10										
					Mileage										
Established circulation with mud pump.										<b>FLOAT EQUIPMENT</b>					
Pumped 300 sx 60/40 2% Gal										Guide Shoe					
3% CC 1/4 C.F. Release plug										Centralizer					
pumped 19.4 bbl H2O. Shut in 300 psi.										Baskets					
cement did circulate to surface.										AFU Inserts					
										Float Shoe					
										Latch Down					
										8 7/8 V L W L L O O n Plug Surface					
Thank you										Pumptrk Charge					
										Mileage					
										Tax					
										Discount					
										Total Charge					
Signature										Richard G. Ramsey					



# QUALITY WELL SERVICE, INC.

5968

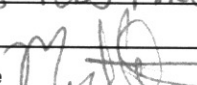
Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Office  
Heath's Cell 620-727-3410  
Office / Fax 620-672-3663

TOO'S  
620-388-5422

Rich's Cell 620-727-3409  
Brady's Cell 620-727-6964

Date	10-25-13	Sec.	22	Twp.	32	Range	13	County	Barber	State	Ks	On Location	6:30 PM	Finish	12:45 AM
Lease	SPENCERS Bluff		Well No.	115		Location MEO Lodge Ks 160 5W 2S 1/2 W 1/2 S									
Contractor	Ninneschan Dels 1101					Owner W into									
Type Job	5 1/2 Longstring					To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.									
Hole Size	7 7/8		T.D.	5040											
Csg.	5 1/2 14		Depth	4769											
Tbg. Size			Depth												
Tool			Depth												
Cement Left in Csg.			Shoe Joint	42.14											
Meas Line			Displace	115.34 Bbls											
Cement Amount Ordered										50x 60/40 Poz					
<b>EQUIPMENT</b>										150x Pro C 10% SALT 5" / 6.5" L.S. etc					
Pumptrk	No.	3		Mike		Common 30 sx									
Bulktrk	No.	9		CHAD		Poz. Mix 20 sx									
Bulktrk	No.					Gel. 3									
Pickup	No.			TODD		Calcium									
<b>JOB SERVICES &amp; REMARKS</b>										Hulls					
Rat Hole	30sx		Salt 16												
Mouse Hole	20sx		Flowseal												
Centralizers	1-4-5-6-7-8-9-12-14-15												Kol-Seal 750 #		
Baskets	1		Mud CLR 48 500 gal												
D/V or Port Collar	CFL-117 or CD110 CAF 38														
Run 113 ft's 5 1/2 14" csg										Sand CC-1 10 gal					
Set 4769' 1st = 42.14 F. STABE' LDR AFFL										Handling 169					
Csg on Bottom Press Ball										Mileage 10					
Break circ w/ rig 1hr										5 1/2 <b>FLOAT EQUIPMENT</b>					
Pump 3 Bbls H <sub>2</sub> O 12 Bbls MFLush 3 Bbls H <sub>2</sub> O										Guide Shoe					
Pkg 2-M holes 50x										Centralizer 10 EA					
Pump 25 sx SCARANGER										Baskets 1 EA					
Pump 125 sx Pro C 15 1/4 gal										AFU Inserts					
SPJ down wash up tick & Release LD plug										Float Shoe 1 EA					
D. so 115.4 Bbls total 2% KCL										Latch Down 1 EA					
Lift psi 800 #															
Land Plug 1500" 12:15 A.M										LMV 10					
Release & 11/60										Pumptrk Charge Longstring					
6000 circ thru JOB										Mileage 10					
Thanks TODD MIKE CHAD															
PLEASE CALL AGAIN															
Signature 										Tax					
										Discount					
										Total Charge					