

Co	nfiden	tiality	/ Requested:
	Yes	N	lo

Kansas Corporation Commission Oil & Gas Conservation Division

1194919

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: 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:	W	ell #:		
	e-Entry	Workover	Field Name:				
	_		Producing Formation:				
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:			
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:		
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet				
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		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 II III Approved by: Date:						

Page Two



Operator Name:			Lease Name:			Well #:	
Sec Twp	S. R	East West	County:				
open and closed, flow	ing and shut-in pressu	ormations penetrated. Dures, whether shut-in pre ith final chart(s). Attach	ssure reached stati	c level, hydrosta	tic pressures, bott		
		tain Geophysical Data a r newer AND an image f		gs must be ema	iled to kcc-well-log	gs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests Taken (Attach Additional S		Yes No					Sample
Samples Sent to Geol	ogical Survey	☐ Yes ☐ No	Nam	9		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING	RECORD Ne	w Used			
		Report all strings set-o			on, 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 / SQL	EEZE RECORD	I	1	
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives			
Perforate Protect Casing Plug Back TD							
Plug Off Zone							
Does the volume of the to	•	n this well? aulic fracturing treatment ex submitted to the chemical o		Yes Yes Yes	No (If No, ski)	o questions 2 and properties of question 3) out Page Three	
Shots Per Foot PERFORATION RECORD - Bridge Plugs Set/Type				Acid, Fracture, Shot, Cement Squeeze Record			
Specify Footage of Each Interval P			orated	(Ar	nount and Kind of Ma	terial Used)	Depth
	0:						
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or ENH	IR. Producing Meth		Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf Wate	er Bl	bls. G	ias-Oil Ratio	Gravity
		· .	4FTUOD OF 65335	TION		DD OD / 127	AN INTERVAL
DISPOSITION Vented Sold	ON OF GAS: Used on Lease	Open Hole	METHOD OF COMPLE Perf. Dually		nmingled	PRODUCTIO	ON INTERVAL:
(If vented, Sub		Other (Specify)	(Submit A		mit ACO-4)		

Form	ACO1 - Well Completion				
Operator	Red Oak Energy, Inc.				
Well Name	Frahm 1-19				
Doc ID	1194919				

All Electric Logs Run

Compensated Density/Neutron
Micro
Sonic
Dual Induction

ALLIED CEMENTING CO., LLC. 038930

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665	SERVICE POINT:				
* *************************************	OVERATE.				
DATE SEC Q TWP. RANGE 34W	CALLED OUT ON LOCATION JOB START JOB PINISH				
	U 30pm 1330an 1:00A W				
OLD CONTINUOUS TOCKHION CO	16, 25, 53kin COUNTY STATE Thomas FS				
OLD OR NEW (Circle one)					
CONTRACTOR MUNG #8	OWNER				
TYPE OF JOB SUN SACR					
HOLESIZE 12114 T.D. 361	CEMENT				
CASINO SIZE 858 DEPTH 361	_ AMOUNT ORDERED 300 (on 300 cc				
TUBING SIZE DEPTH	2 % gel				
DRILL PIPE: DEPTH					
TOOL DEPTH					
PRES. MAX MINIMUM	COMMON 300 @ 1545 4635				
MEAS. LINE SHOE JOINT	POZMIX @				
CEMENT LEFT IN CSG. 15.	GEL 6 @ 208 124				
PERFS.	CHLORIDE II @ 58 20 6 40 3				
DISPLACEMENT 720	_ ASC@				
EQUIPMENT					
PUMPTRUCK CEMENTER Tuzzy					
# 431 HELPER 1211					
BULK TRUCK					
# 394 DRIVER DANN					
BULK TRUCK					
# DRIVER					
	- MANDLING 317 @ 2 760 8				
	MILEAGE 11045141111 88760				
REMARKS:					
comentalid circulate	TOTAL JOYY				
Chilater	· · · · · · · · · · · · · · · · · · ·				
	SERVICE				
Plux down @ 1:00 AM					
, , , , , , , , , , , , , , , , , , ,	DEPTH OF JOB 56 (
	PUMP TRUCK CHARGE				
Thanks Fuzzy + crace	EXTRA FOOTAGE @ @				
	MILEAGE 28 @ 7 9 196				
197.5	MANIFOLD@				
CHARGETO: Red OAK GREEN					
CHARGE TO: ICEO CAR ENERGY					
STREET	TOTAL 1214				
CITY	TOTAL				
CITYSTATEZIP					
	PLUG & FLOAT EQUIPMENT				
	1.818 plug @ 53				
,					
To Allied Cementing Co., LLC.	@				
You are hereby requested to rent comenting equipment					
and furnish comenter and helper(s) to assist owner or	(a)				
contractor to do work as is listed. The above work was					
done to satisfaction and supervision of owner agent or	2200				
Contractor. I have reed and meda-med at a Contractor	8314.60 TOTAL 53				
contractor. I have read and understand the "GENERAL					
TERMS AND CONDITIONS" listed on the reverse side.	SALES TAX (If Any) 447,54				
1/1	TOTAL CHARGES 8 761,94				
PRINTED NAME KOCKEY FAM					
	DISCOUNT IF PAID IN 30 DAYS				
SIGNATURE FORM FOR	ga				

REMITTO P.O. BOX 31

ALLIED CEMENTING CO., LLC. 035087 A Federal Tax 1.D.# 20-5975804

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665					SERVICE POINT:				
DATE 29.		SEC.19	TWP.	RANGE 34W	CALLED OUT	ON LOCATION	JOB START 3:30 AM	JOD FINISH A	
LEASE		wegl#	1-19	LOCATION Cald	Y 25-53/4W	- N ENHO	Thomas	STATE	
OLD OR NE	WO(Circ	le one)							
CONTRACT TYPE OF JO		MUREL	TN DRL9	kig*8	OWNER	SAME			
HOLE SIZE		7781	T.D.	4810	CEMENT				
CASING SIZ	Æ		DEP	TH	AMOUNT OR	DERED			
TUBINO SIZ			DEP		220 SKS 6	60/40 poz 4/20	9E1/4 FA	-SEM/	
DRILL PIPE	7 2 **	11/2	DEP					· · · · · ·	
TOOL PRES. MAX	•		DEP			177 -4-	15 45	2000 40	
MEAS. LINE				E JOINJ.	_ COMMON POZMIX	132 5ks 88 5ks	@ 15 43 @ 8 4	2039 7	
CEMENT LE		SG.			_ GEL	8 5Ks	@ 20 80	111 40	
PERFS.					CHLORIDE_	B J/KS	@ ·	760 20	
DISPLACEM	ENT			~	ASC		@		
		EQU	LPMENT				_@		
			~	* on		1 0 1	_@		
PUMP TRUC	K CE	MENT		RRY	F/0-SEA1		_@ <u>Z Z</u>	137-6	
# 422		LPER	we	YNE			_@		
BULK TRUC			11	28N5			· · · · · · · · · · · · · · · · · · ·		
# 394		IVER	LA	51.5					
BULK TRUCI		IVER					@		
	DR	IVEN			- HANDLING_	228 5Ks	@ 2 40	547	
		n 134			MILEAGE Z	& PERSKY	nt/2	638 3	
6.	,	KILIV	IARKS:	, .			TOTAL .	4252-6	
25 SX	3 A	7	28001		-		*		
100 sk			1960			Servic	Œ	36	
10 56			660		DEIXELOCIO		C. 00 40		
15 5K	 	DUSE	Hola	· · · · · · · · · · · · · · · · · · ·	DEITH OF JOI		800	1/0-45	
30 SK			ols	~	EXTRA FOOTA		<u> </u>	1103	
		35	<u>.</u>		MILEAGE	28 MI	- Ane	1962	
					MANIFOLD	A STATE OF THE PARTY OF THE PAR	@		
				THANK	<u> </u>		@ <u>.</u>	<u> </u>	
CHARGE TO:	0-	.1 -	1 × 0	Y Y	by		@		
CHARGE TO:	18	0 0	11- 2	NERGY				1300	
TREET							TOTAL _	1381 8	
ITY		CTAT	re	ZIP_	5.				
,14 1		31A	IE	ZIF	P	LUG & FLOAT	EQUIPMENT	1	
					1-DRY HO			40 4	
					1		@		
							- @		
o Allied Cem	enting	Co., LI	.C.	*	<u> </u>		@·		
ou are hereby	y reque	sted to	rent cemen	ting equipment			@	_	
				ssist owner or			@		
				bove work was	44			1 24	
				owner agent or	5,653.9	10	TOTAL _	40 3	
				Ine "GENERAL	SALES TAX (IT	\sim	20		
CKMS AND	COND	TTIONS	s" listed on	the reverse side.		10	70 10		
	1	1	-	<u>ت</u>	TOTAL CHARG	es_2 $0,90$	13.10		
UNTED NAM	E	20/2	egy	ALL	DISCOUNT		JE PAID II	N.30 DAYS	
,		1	7	•				THUDING .	
DNATHDE	Ko	1	00	71.					