



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1195540  
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: \_\_\_\_\_

1195540

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:  Yes  No

Date of First, Resumed Production, SWD or ENHR: \_\_\_\_\_ Producing Method:  
 Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Hartman Oil Co., Inc.
Well Name	Legere Trust (OWWO) 1-29
Doc ID	1195540

All Electric Logs Run

Induction
Density
Micro
GR
NEU
CBL





PO Box 93999  
Southlake, TX 76092

Voice: (817) 546-7282  
Fax: (817) 246-3361

# INVOICE

Invoice Number: 139809  
Invoice Date: Nov 14, 2013  
Page: 1

<b>Bill To:</b>
Hartman Oil Co., Inc. H2 Drilling & H2 Trucking 3545 W. Jones Avenue Garden City, KS 67846

Customer ID	Field Ticket #	Payment Terms	
Hart	61221	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-02	Oakley	Nov 14, 2013	12/14/13

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Legere Trust #1-29 <b>81536</b>	20.90	3,135.00
150.00	CEMENT MATERIALS	ASC	15.95	6,858.50
430.00	CEMENT MATERIALS	Light Weight	0.98	1,715.00
1,750.00	CEMENT MATERIALS	Gilsonite	23.40	70.20
3.00	CEMENT MATERIALS	Gel	18.90	793.80
42.00	CEMENT MATERIALS	FL-160	9.80	205.80
21.00	CEMENT MATERIALS	Defoamer	2.97	445.50
150.00	CEMENT MATERIALS	Flo Seal	26.35	421.60
16.00	CEMENT MATERIALS	Salt	58.70	704.40
12.00	CEMENT MATERIALS	Super Flush	2.48	1,861.04
750.42	CEMENT SERVICE	Cubic Feet	2.60	7,319.52
2,815.20	CEMENT SERVICE	Ton Mileage	2,558.75	2,558.75
1.00	CEMENT SERVICE	Production -- Bottom Stage	2,213.75	2,213.75
1.00	CEMENT SERVICE	Production -- Top Stage	7.70	693.00
90.00	CEMENT SERVICE	Pump Truck Mileage	275.00	275.00
1.00	CEMENT SERVICE	Manifold Head Rental	4.40	396.00
90.00	CEMENT SERVICE	Light Vehicle Mileage	5,335.26	5,335.26
1.00	EQUIPMENT SALES	5-1/2 D V Tool	408.33	408.33
1.00	EQUIPMENT SALES	5-1/2 AFU Float Shoe	324.09	324.09
1.00	EQUIPMENT SALES	5-1/2 Latch Down Plug Assembly	57.33	573.30
10.00	EQUIPMENT SALES	5-/12 Centralizer		

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
<b>TOTAL</b>	<b>Continued</b>

ALL PRICES ARE NET, PAYABLE  
30 DAYS FOLLOWING DATE OF  
INVOICE. 1 1/2% CHARGED  
THEREAFTER. IF ACCOUNT IS  
CURRENT, TAKE DISCOUNT OF

\$ 9,645.06

ONLY IF PAID ON OR BEFORE  
Dec 9, 2013

# ALLIED OIL & GAS SERVICES, LLC 061221

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Oakley KS

DATE <u>11-14-13</u>	SEC <u>29</u>	TWP. <u>5</u>	RANGE <u>22</u>	CALLED OUT	ON LOCATION <u>7:00pm</u> <small>(11-13-13)</small>	JOB START <u>1:00am 3/3</u>	JOB FINISH <u>1:30am 4:30</u> <small>2013</small>
LEASE <u>Legere Frost</u>	WELL # <u>1-29</u>	LOCATION <u>Hill City N to Rd 4E 1E 1N</u>			COUNTY <u>Norton</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)				<u>W into</u>			

CONTRACTOR H2 rig 4  
 TYPE OF JOB 5 1/2" production (2 stage)  
 HOLE SIZE 7 7/8 T.D. 3770'  
 CASING SIZE 5 1/2 DEPTH 3721.82'  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL D.V. Tool DEPTH 1928.35'  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT 16.83'  
 CEMENT LEFT IN CSG. 16.83'  
 PERFS.  
 DISPLACEMENT Bottom: 40water 48.18 mud Top 45.89 water  
 EQUIPMENT

OWNER Same  
 CEMENT  
 AMOUNT ORDERED 200skts lite 1/4" Flo-seal 5# gilsonite  
230skts lite 1/4" Flo-seal 150skts ASC 10% salt  
2% gel .30 of 1% PL-110 .14" Defoamer, 50skts Cam  
 COMMON 50skts @ 14.90 ~~885.00~~  
 POZMIX @  
 GEL @  
 CHLORIDE @  
 ASC 150skts @ 20.90 3135.00  
Lite 430skts @ 15.95 6858.50  
gilsonite 1750# @ .98 1715.00  
gel 3skts @ 23.40 70.20  
PL-110 42# @ 18.90 793.80  
Defoamer 21# @ 9.80 205.80  
Flo-Seal 150# @ 2.97 445.50  
Salt 16skts @ 26.35 421.60  
WFR-II (Superflash) 12bb @ 58.70 704.40  
 HANDLING 750.42ft<sup>3</sup> @ 2.48 1861.04  
 MILEAGE 31.28 hrs x 90mi x 2.60 7319.52

PUMP TRUCK CEMENTER Paul Beaver  
 # 120 HELPER Tyler Flipse  
 BULK TRUCK  
 # 566 DRIVER Chris Helyastine  
 BULK TRUCK  
 # 386 DRIVER Mike McKampson

**REMARKS:**

Bottom Stage  
 Break circulation drop ball, wait through @ 1000' circ. 2 hrs.  
 Heat up pump truck to casing, mix 12 bb WFR-II, mix  
 100skts Lite failed by 150skts ASC. Shut-in, wash up  
 pump returns to pit, heat backup to casing, release plug  
 displace with water and mud plug did 1400' work 900'  
 lift pressure, port opened top @ 1000' circ. 1.5 hrs  
Top mix 15skts in R.H. mix 15skts in M.H. mix 200skts All  
 failed by 50skts Cam Displace with water plus  
 1 added @ 1400' with 200' lift pressure Cement did  
 circulate

TOTAL 24485.36  
23,830.36

**SERVICE**

DEPTH OF JOB 3721.82'  
 PUMP TRUCK CHARGE 2558.75 2213.75  
 EXTRA FOOTAGE @  
 MILEAGE MilHV 90 @ 7.70 693.00  
 MANIFOLD Head @ 275.00  
 MILV 90 @ 4.40 396.00

TOTAL 6136.50

CHARGE TO: Hartman Oil *Thank You!*  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

Weatherford (5 1/2)  
 D.V. Tool @ 5335.26  
 AFV Float shoe @ 408.33  
 Latch down plug Assembly @ 324.08  
 Centralizers 10 @ 57.23 572.30  
 Baskets 2 @ 394.29 788.58

TOTAL 7,429.56

To: Allied Oil & Gas Services, LLC.  
 You are hereby requested to rent cementing equipment  
 and furnish cementer and helper(s) to assist owner or  
 contractor to do work as is listed. The above work was  
 done to satisfaction and supervision of owner agent or  
 contractor. I have read and understand the "GENERAL  
 TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 37,096.42  
 DISCOUNT 9,645.06 IF PAID IN 30 DAYS  
27,451.35 Net.

PRINTED NAME Justin Trout  
 SIGNATURE Justin Trout



PO Box 93999  
Southlake, TX 76092

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Hart	61221	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-02	Oakley	Nov 14, 2013	12/14/13

Quantity	Item	Description	Unit Price	Amount
2.00	EQUIPMENT SALES	5-1/2 Basket	394.29	788.58
1.00	EQUIPMENT OPERATOR	Paul Beaver		
1.00	EQUIPMENT OPERATOR	Tyler Flipse		
1.00	OPERATOR ASSISTANT	Chris Helpingstine		
1.00	OPERATOR ASSISTANT	Mike McKampson		

*A. Mitchell*  
11-25-13

Subtotal	37,096.42
Sales Tax	1,502.78
Total Invoice Amount	38,599.20
Payment/Credit Applied	
<b>TOTAL</b>	<b>38,599.20</b>

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 9,645.06

ONLY IF PAID ON OR BEFORE  
Dec 9, 2013