



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1195785
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: _____

1195785

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 4964
Name DCF Exploration
Address 940 Wadsworth Blvd., Suite 100
City/State/Zip Lakewood, CO 80215

Purchaser

Operator Contact Person Douglas C. Frickey
Phone (303) 232-5011

Contractor: License # 5107
Name H-30 Drilling, Inc.

Wellsite Geologist Richard J. Hall
Phone (303) 279-6894

Designate Type of Completion

New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If OWMO: old well info as follows:
Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable
5-26-88 6-3-88 6-4-88
Spud Date Date Reached TD Completion Date
4,370'
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 222 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set feet
If alternate 2 completion, cement circulated from feet depth to w/ SX cmt
Cement Company Name
Invoice #

API No. 15-065-22,459-0000
County Graham
NW NE SE Sec. 28 Twp. 9S Rge. 25 East West

2310 Ft North from Southeast Corner of Section
990 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

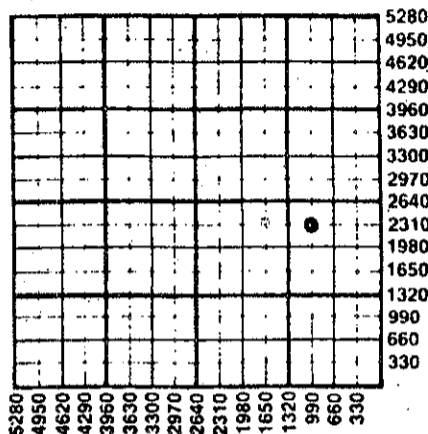
Lease Name Sayer "A" Well # 1

Field Name Bollig

Producing Formation Lansing/Kansas City

Elevation: Ground 2580' KB 2585'

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit # None required

Groundwater (Well) Ft North from Southeast Corner
Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water (Stream, pond etc) Ft North from Southeast Corner
Ft West from Southeast Corner
Sec Twp Rge East West

Other (explain) Purchased from landowner's small pond
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of all wireline logs and drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature Douglas C. Frickey
Title President Date 6/29/88

Subscribed and sworn to before me this 29th day of June 1988
Notary Public Darcel L. Hartley
Date Commission Expires 10/02/90

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Time log Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
RECEIVED
CORPORATION COMMISSION
7-1-88

Sec. 28 Twp. 9 Rge. 25 E

SIDE TWO

Operator Name DCF Exploration Lease Name Sauer A Well # 1

Sec... 28 ... Twp... 9S ... Rge... 25 ... East West ... County... Graham

WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

FORMATION TOPS

Formation	Depth	Interval
Anhydrite	2224	+361
Base/Anhydrite	2259	+326
Topeka	3615	-1030
Heebner	3828	-1243
Toronto	3852	-1267
Lansing	3868	-1283
Base/Kansas City	4099	-1514
Marmaton	4227	-1642
Cherokee	4299	-1714

Name	Top	Bottom
Shale	0	125'
Shale and Sand	125'	225'
Shale	225'	625'
Shale and Sand	625'	2,260'
Lime and Shale	2,260'	2,860'
Shale and Lime	2,860'	3,090'
Lime and Shale	3,090'	3,225'
Shale and Lime	3,225'	3,660'
Lime and Shale	3,660'	4,240'
Lime	4,240'	4,316'
Lime and Shale	4,316'	4,370'
Rotary Total Depth		4,370'

DRILL STEM TEST ON ATTACHED PAGE.

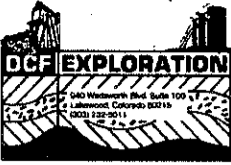
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs/Ft.	Setting Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	23#	222'	60/40 Poz	150	3% cc 2% gel
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)		Depth	
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No			
Date of First Production		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....					
Estimated Production Per 24 Hours	Oil		Gas		Water		Gravity
	Bbls		MCF		Bbls		CFPB

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify)
 Used on Lease Dually Completed
 Commingled





Sauer "A" #1
 NW NE SE of Sec. 28 T-9-S R-25-W
 Graham County, Kansas
 API #: 15-065-22,459

DRILL STEM TEST INFORMATION

DST #1 (TORONTO, LANSING "A" ZONE)

Interval: 3830' - 3883'
 Open: 30-30-15-30
 IF: Bottom Bucket Blow in 5".
 FF: Bottom Bucket Blow in 13".
 Recovery: 620' Muddy Salt Water - Chlorides: 95,000
 IFP: 107 - 243
 ISIP: 496
 FFP: 292 - 321
 FSIP: 496

DST #2 (LANSING "C" & "D" ZONES)

Interval: 3890' - 3927'
 Open: 30-30-30-45
 IF: 7" Blow in 30".
 FF: 5" Blow in 30".
 Recovery: 100' Muddy Salt Water - Chlorides: 90,000
 IFP: 58 - 68
 ISIP: 389
 FFP: 87 - 97
 FSIP: 379

DST #3 (LANSING "E" & "F" ZONES)

Interval: 3941' - 3962'
 Open: 30-30-15-30
 IF: 1" Blow in 30".
 FF: No Return Blow.
 Recovery: 15' Mud
 IFP: 40 - 40
 ISIP: 848
 FFP: 49 - 49
 FSIP: 828

DST #4 (KANSAS CITY "H" ZONE) JUL 1 1988

Interval: 3994' - 4026'
 Open: 15-15- - -
 IF: 1/8" Blow in 15".
 FF: N/A
 Recovery: 5' Mud
 IFP: 49 - 49
 ISIP: 68

DST #5 (KANSAS CITY "I" ZONE)

Interval: 4028' - 4047'
 Open: 20- - - -
 IF: 1/8" Blow in 10".
 Recovery: 2' Mud
 IFP: 29 - 29

DST #6 (KANSAS CITY "K" ZONE)

Interval: 4063' - 4087'
 Open: 15- - - -
 IF: Weak Surface Blow dead in 7".
 Recovery: 2' Mud
 IFP: 58 - 58

RECEIVED
 STATE CORPORATION COMMISSION

CONSERVATION DIVISION
 Wichita, Kansas

Date 3-17-14 District Dakleys Ticket No. 062017
 Company Tex Kan Rig Val 27
 Lease Sauer A Well No. 6
 County Graham State KS
 Location 28-9-25 Field _____

CEMENT DATA: (Bottom stage)
 Spacer Type: water / WFR-II
 Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG _____

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 5/8 Type New Weight 15.5 Collar _____

LEAD: Pump Time _____ hrs. Type ASC 10% salt
5" Gilsomite 240 gal Excess _____

Amt. 110 Skys Yield 1.56 ft³/sk Density 14.66 PPG _____

TAIL: Pump Time _____ hrs. Type Lite 1/4"
Flow-seal Excess _____

Amt. _____ Skys Yield 1.76 ft³/sk Density 12.92 PPG _____

WATER: Lead 6.97 gals/sk Tail 9.28 gals/sk Total _____ Bbls. _____

Casing Depths: Top KB Bottom 4176.77

Pump Trucks Used 20-Tyler

Bulk Equip. Bottom - 600 - Tain

Top stage KB DV Tool @ 2198'

Top - 566 - Adam

373 - Thomas

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 7 7/8 T.D. 4175 ft. P.B. to _____ ft.

Float Equip: Manufacturer Weatherford (5 7/2)

Shoe: Type AFU float shoe Depth 4176.77

Float: Type Latidown Flex Assy Depth 4134.27

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. .0238 Lin. ft./Bbl. _____

Centralizers: Quantity 2 Plugs Top _____ Btm. FLRY

Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Stage Collars DV Tool (2198')

Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Special Equip. 20 centralizers 40 Beveled stoplamps

Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Disp. Fluid Type Bot. 50% mud Amt. _____ Bbls. Weight _____ PPG _____

Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Mud Type Top 52 31 bbl water Weight _____ PPG _____

Perforations: From _____ ft. to _____ ft. Amt. _____

COMPANY REPRESENTATIVE Tom Barrens

CEMENTER Paul Bunker

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
						Hold safety, marking Run pipe / float equip Circ. 30 min / Brain ball Ball went through shoe @ 2100 # circ. 1 hr. (Bottom stage)
3:45			10.0	10 bbl		Pump water spacer mix WFR-II
			10.0	20 bbl		
			10.0	30 bbl		pump water spacer mix WFR-II
			10.0	40 bbl		
			18.25	58.25 bbl		mix 110 skys ASC @ 14.66 # shut down / wash up into pit release plug
			50.0	108.25 bbl		Displace w/ water
			48.40	156.65 bbl		Displace w/ mud plug did land @ 1100 # Float held
4:45						Drop Dart, opened float @ 700 # Top stage
5:15			6.63	6.63		mix 30 skys in R.H.
			3.31	9.94		mix 15 skys in m.H.
			156.88	166.82		mix 910 skys Lite @ 12.92 # shut down / wash up into pit release plug
			52.31	219.13		Displace w/ water Plug did land @ 1100 # closed Tank cement did circ.

Bot 600 Bot 1100 Bot 1661
 FINAL DISP. PRESS 600 PSI BUMP PLUG TO Top 1600 PSI BLEEDBACK Top BBLs. Thank you!

ALLIED OIL & GAS SERVICES, LLC 062017

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Oakley, KS
Tot 3:45pm 4:45pm

DATE <u>3-14-14</u>	SEC <u>28</u>	TWP <u>9</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION	JOB START <u>5:15pm</u>	JOB FINISH <u>6:15am</u>
LEASE <u>Saver A</u>	WELL# <u>6</u>	LOCATION <u>St Peter N to Rd H</u>			COUNTY <u>Graham</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1 1/2 W 1/2 N E+S into</u>				

CONTRACTOR <u>Val rig 97</u>	OWNER <u>Same</u>
TYPE OF JOB <u>Production (2 stage)</u>	
HOLE SIZE <u>7 7/8</u>	T.D. <u>4176.77</u>
CASING SIZE <u>5 1/2</u>	DEPTH <u>4176.77</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL <u>DV TOOL</u>	DEPTH <u>2198'</u>
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT <u>42.48'</u>
CEMENT LEFT IN CSG. <u>42.48'</u>	
PERFS.	
DISPLACEMENT <u>Bot. 50 water 48.40 mud</u>	
<u>Top 52.31 water</u>	EQUIPMENT

CEMENT			
AMOUNT ORDERED <u>110</u>	<u>110</u> sks ASC 10% salt		
	<u>5</u> Gilsomite 2% gel, 890 sks Lite		
	<u>1/4</u> Flo-seal, 20 Bbl super flush		
COMMON	@		
POZMIX	@		
GEL	<u>2</u> sks @ 23.40		<u>46.80</u>
CHLORIDE	@		
ASC	<u>110</u> sks @ 20.90		<u>2299.00</u>
Lite	<u>710</u> sks @ 15.95		<u>11324.50</u>
Flo-seal	<u>177.5</u> # @ 2.97		<u>527.18</u>
Gilsomite	<u>550</u> # @ .98		<u>539.00</u>
Salt	<u>12</u> sks @ 26.35		<u>316.20</u>
WFR-II	<u>20</u> bbl @ 58.70		<u>1174.00</u>
	@		
	@		
	@		
HANDLING	<u>1147.66</u> @ 2.48		<u>2846.20</u>
MILEAGE	<u>47.59</u> tons x 60mi @ 2.60		<u>7424.04</u>
			TOTAL <u>26,496.92</u>

PUMP TRUCK # <u>120</u>	CEMENTER <u>Paul Beaver</u>
BULK TRUCK # <u>600</u>	HELPER <u>Tyler Flipse</u>
BULK TRUCK # <u>566</u>	DRIVER <u>Juanl (TWS)</u>
<u>373</u>	DRIVER <u>Adam Flipse</u>
	Driver <u>Thomas (TWS)</u>

REMARKS:

Run Pile, Dropball, ball pressure 200# pump 10 bbl water mix 10 bbl WFR-II pump 10 bbl water mix 10 bbl WFR-II mix 110 sks ASC, Displace water mud, plug did land @ 1000' w/ 600' lift pressure Circ 30 min mix 30 sks in R.H mix 15 sks in M.H mix sks Lite, Displace w/ water, plug did land @ 1100' w/ 600' lift pressure, Cement did circ. 50 bbl to pit
Thank You!

CHARGE TO: Texkan
STREET _____
CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>4176.77'</u>		
PUMP TRUCK CHARGE	<u>2765.75</u>		<u>2443.75</u>
EXTRA FOOTAGE	@		
MILEAGE MILV	<u>60</u> @ 7.70		<u>462.00</u>
MANIFOLD Head	@		<u>275.00</u>
MILV	<u>100</u> @ 4.40		<u>440.00</u>
	@		
			TOTAL <u>16,210.50</u>

PLUG & FLOAT EQUIPMENT

<u>5 1/2</u> Weatherford			
AFU Float shoe	@		<u>545.00</u>
Loaddown Flex Assy	@		<u>660.00</u>
Centralizers	<u>2</u> @ 57.00		<u>114.00</u>
DV Tool	@		<u>5335.00</u>
Spiralizers	<u>20</u> @ 300.00		<u>6000.00</u>
Lock rings	<u>40</u> @ 59.00		<u>2360.00</u>
			TOTAL <u>15,014.00</u>

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.

PRINTED NAME _____
SIGNATURE Tom Deen
Paul B

SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____ IF PAID IN 30 DAYS