



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1197890
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: _____

1197890

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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Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	HHH 1
Doc ID	1197890

Tops

Name	Top	Datum
Anhy.	1972	(+ 586)
Base Anhy.	2006	(+ 552)
Heebner	3881	(-1323)
Lansing	3921	(-1363)
BKC	4228	(-1670)
Marmaton	4270	(-1712)
Pawnee	4346	(-1788)
Ft. Scott	4430	(-1872)
Cherokee Sh.	4455	(-1915)
Miss. Por.	4560	(-2002)
LTD	4651	(-2093)



RECEIVED

FEB 15 2014

INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 141267

Invoice Date: Feb 5, 2014

Page: 1

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

Bill To:
Palomino Petroleum, Inc. 4924 SE 84th St. Newton, KS 67114-8827

Customer ID	Field Ticket #	Payment Terms	
Palo	62618	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-03	Great Bend	Feb 5, 2014	3/7/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	HHH #1		
123.00	CEMENT MATERIALS	Class A Common	17.90	2,201.70
82.00	CEMENT MATERIALS	Pozmix	9.35	766.70
7.00	CEMENT MATERIALS	Gel	23.40	163.80
52.00	CEMENT MATERIALS	Flo Seal	2.97	154.44
220.35	CEMENT SERVICE	Cubic Feet Charge	2.48	546.47
248.12	CEMENT SERVICE	Ton Mileage Charge	2.60	645.11
1.00	CEMENT SERVICE	Rotary Plug	2,249.84	2,249.84
27.00	CEMENT SERVICE	Pump Truck Mileage	7.70	207.90
27.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	118.80
1.00	EQUIPMENT SALES	8-5/8 Wooden Plug	110.00	110.00
1.00	CEMENT SUPERVISOR	Charles Kinyon		
1.00	EQUIPMENT OPERATOR	Mike Scothorn		
1.00	EQUIPMENT OPERATOR	Daniel Casper		
1.00	OPERATOR ASSISTANT	Josh Ellis		

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

\$ 1,432.95

ONLY IF PAID ON OR BEFORE
Mar 2, 2014

Subtotal	7,164.76
Sales Tax	548.10
Total Invoice Amount	7,712.86
Payment/Credit Applied	
TOTAL	7,712.86

ALLIED OIL & GAS SERVICES, LLC 062618

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
great Bend

DATE <i>2-5-19</i>	SEC <i>36</i>	TWP. <i>15</i>	RANGE <i>25</i>	CALLED OUT <i>8:00am</i>	ON LOCATION <i>1:00pm</i>	JOB START <i>4:30pm</i>	JOB FINISH <i>5:30pm</i>
LEASE <i>HHH</i>		WELL # <i>1</i>		LOCATION <i>around 1w to J Rd SW</i>		COUNTY <i>Tarrant</i>	STATE <i>TX</i>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<i>1/4 E 1/4 N E clater</i>			

CONTRACTOR *Pickell 10*
 TYPE OF JOB *Rotary Plug*
 HOLE SIZE *7 1/2* T.D. *4650*
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE *9 1/2* DEPTH *1980*
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER *Name*
 CEMENT
 AMOUNT ORDERED *205# 60/40*
41 gal 1/2 lb
 COMMON *123* @ *17.90* *2,201.70*
 POZMIX *82* @ *9.35* *766.70*
 GEL *7* @ *23.40* *163.80*
 CHLORIDE _____ @ _____
 ASC _____ @ _____
100 gal *52* @ *2.97* *154.44*
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING *220.35* @ *2.48* *546.46*
 MILEAGE *9.19 x 27x* *2.60* *645.13*
 TOTAL *4,478.23*

REMARKS:

*1st plug @ 1980 10 BBI H2O ahead
 mix 25 lbs displace 3.5 BBI H2O
 23 BBI mud rig pulled to 975
 set 2nd plug 10 BBI H2O ahead
 mix 100 lbs displace 3.5 BBI H2O
 3.83 BBI mud rig pulled to 265
 set 3rd plug 3 BBI H2O ahead
 mix 40 lbs displace 1.16 BBI H2O
 rig pulled to 40ft mix 10 lbs top off
 plug set hole w/ 30 lbs*

CHARGE TO: *palomino*
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB *1980*
 PUMP TRUCK CHARGE *2249.87*
 EXTRA FOOTAGE _____ @ _____
 MILEAGE *Hum 27* @ *7.70* *207.90*
 MANIFOLD _____ @ _____
Hum 27 @ *4.40* *118.80*
 _____ @ _____
 TOTAL *2,576.54*

PLUG & FLOAT EQUIPMENT

8 1/2 wooden plug *110.00* *110.00*
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL *110.00*

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 *X Mike Kern*
 SIGNATURE *X Mike Kern*

SALES TAX (if Any) _____
 TOTAL CHARGES *7,164.77*
 DISCOUNT *1,432.95* IF PAID IN 30 DAYS
5,731.81

thank you!



RECEIVED

FEB 08 2014

INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 141139
Invoice Date: Jan 28, 2014
Page: 1

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

Bill To:
Palomino Petroleum, Inc. 4924 SE 84th St. Newton, KS 67114-8827

Customer ID	Field Ticket #	Payment Terms	
Palo	61849	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-01	Great Bend	Jan 28, 2014	2/27/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	HHM #1		
260.00	CEMENT MATERIALS	Class A Common	17.90	4,654.00
5.00	CEMENT MATERIALS	Gel	23.40	117.00
733.00	CEMENT MATERIALS	Chloride	0.80	586.40
281.33	CEMENT SERVICE	Cubic Feet Charge	2.48	697.70
346.41	CEMENT SERVICE	Ton Mileage Charge	2.60	900.67
1.00	CEMENT SERVICE	Surface	1,512.25	1,512.25
27.00	CEMENT SERVICE	Pump Truck Mileage	7.70	207.90
27.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	118.80
1.00	CEMENT SUPERVISOR	Dustin Chambers		
1.00	EQUIPMENT OPERATOR	Kevin Eddy		
1.00	EQUIPMENT OPERATOR	Daniel Casper		

Cement for surface pipe 1/28

Subtotal	8,794.72
Sales Tax	409.84
Total Invoice Amount	9,204.56
Payment/Credit Applied	
TOTAL	9,204.56

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

\$ 1,758.94

ONLY IF PAID ON OR BEFORE
Feb 22, 2014

- 1,758.94
7,445.62

ALLIED OIL & GAS SERVICES, LLC 061849

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
Cereso Berlyts

DATE <u>1-28-14</u>	SEC. <u>36</u>	TWP. <u>15S</u>	RANGE <u>25W</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00AM</u>	JOB FINISH <u>6:00AM</u>
LEASE <u>HMM</u>	WELL # <u>1</u>	LOCATION <u>Arnold N to Crillme 1/2</u>			COUNTY <u>Trego</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)			<u>TUN Etno</u>				

CONTRACTOR <u>Pickrell Drilling #10</u>	
TYPE OF JOB <u>Surf Ace</u>	
HOLE SIZE <u>12 1/4</u>	T.D.
CASING SIZE <u>5 5/8</u>	DEPTH <u>217</u>
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2</u>	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>15 ft</u>	
PERFS.	
DISPLACEMENT <u>12,96 bbls Freshwater</u>	
EQUIPMENT	

PUMP TRUCK # <u>366</u>	CEMENTER <u>Dustin Chambers</u>
	HELPER <u>Kevin Eddy</u>
BULK TRUCK # <u>544-198</u>	DRIVER <u>Don Cooper</u>
BULK TRUCK #	DRIVER

REMARKS:

pump 5 bbls Freshwater Above
mix 150 sks cement
Displace 12,96 bbls Freshwater
or 4 hrs in
Leaving drill rig
ding down 7:30 AM An
1" Plug Down
1" plug mix 110 sks cement to top of 5:45 sks
Cement d. of crillme

CHARGE TO: Palomino Petroleum
STREET _____
CITY _____ STATE _____ ZIP _____

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 X Mike Kern
SIGNATURE a Mike Kern
Thank You!!

OWNER			
CEMENT			
AMOUNT ORDERED <u>250 sks class A</u>			
<u>38 cu 2 1/2 gal</u>			
COMMON	<u>260</u>	@ <u>17.90</u>	<u>4,654.00</u>
POZMIX		@	
GEL	<u>5</u>	@ <u>23.40</u>	<u>117.00</u>
CHLORIDE	<u>733</u>	@ <u>.80</u>	<u>586.40</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>281.33</u>	@ <u>2.48</u>	<u>697.69</u>
MILEAGE	<u>12.83 x 27 x</u>	<u>2.60</u>	<u>900.66</u>
			TOTAL <u>6,955.75</u>

SERVICE

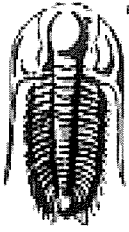
DEPTH OF JOB			
PUMP TRUCK CHARGE	<u>1512.25</u>		
EXTRA FOOTAGE	@		
MILEAGE Hum	<u>27</u>	@ <u>7.70</u>	<u>207.90</u>
MANIFOLD	@		
	<u>Hum</u>	<u>27</u>	@ <u>4.40</u> <u>118.80</u>
	@		

TOTAL 1,838.95

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
TOTAL _____		

SALES TAX (If Any) _____
TOTAL CHARGES 8,794.70
1,758.94
DISCOUNT _____ IF PAID IN 30 DAYS
7,035.76



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Palomino Petroleum Inc
 4924 SE 84th St
 Newton KS 67114-8827
 ATTN: Ryan Seib

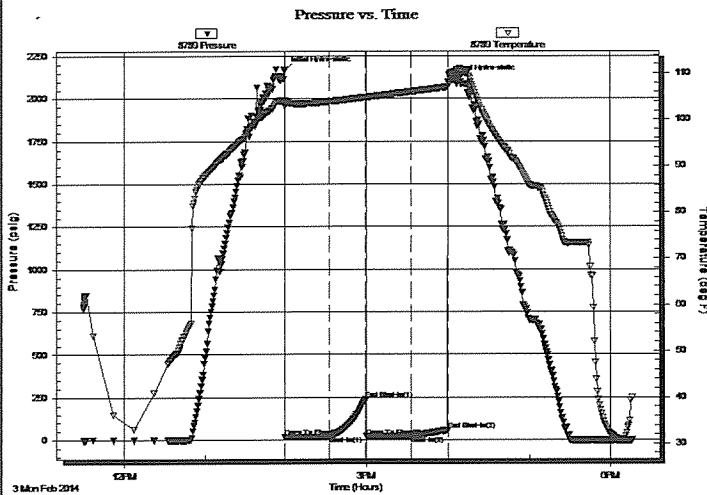
35 15s 25w Trego
HHH # 1
 Job Ticket: 50423 **DST#: 1**
 Test Start: 2014.02.03 @ 11:30:02

GENERAL INFORMATION:

Formation: **Ft Scott**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 13:59:45
 Time Test Ended: 18:15:45
 Interval: **4400.00 ft (KB) To 4463.00 ft (KB) (TVD)**
 Total Depth: 4463.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Jim Svaty
 Unit No: 76
 Reference Elevations: 2558.00 ft (KB)
 2551.00 ft (CF)
 KB to GR/CF: 7.00 ft

Serial #: 8789 **Inside**
 Press@RunDepth: 24.27 psig @ 4402.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2014.02.03 End Date: 2014.02.03 Last Calib.: 2014.02.03
 Start Time: 11:30:02 End Time: 18:15:45 Time On Btm: 2014.02.03 @ 13:59:30
 Time Off Btm: 2014.02.03 @ 16:01:30

TEST COMMENT: 30-IFP- Surface Blow Building to 1in.
 30-ISIP- No Blow
 30-FFP- Surface Blow
 30-FSIP- No Blow



PRESSURE SUMMARY

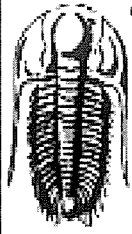
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2167.52	104.13	Initial Hydro-static
1	18.03	102.97	Open To Flow (1)
34	24.93	103.91	Shut-In(1)
60	237.91	104.84	End Shut-In(1)
61	20.45	104.79	Open To Flow (2)
94	24.27	106.05	Shut-In(2)
121	58.29	107.05	End Shut-In(2)
123	2116.53	110.00	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	OSM 100%	0.14

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Palomino Petroleum Inc

35 15s 25w Trego

4924 SE 84th St
New ton KS 67114-8827

H H H # 1

Job Ticket: 50423

DST#: 1

ATTN: Ryan Seib

Test Start: 2014.02.03 @ 11:30:02

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 54.00 sec/qt	Cushion Volume: bbl		
Water Loss: 11.97 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 4100.00 ppm			
Filter Cake: 1.00 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
10.00	OSM 100%	0.140

Total Length: 10.00 ft Total Volume: 0.140 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments:

Serial #: 8789

Inside

Palomino Petroleum Inc

HHH# 1

DST Test Number: 1

