



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1202031  
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: \_\_\_\_\_

1202031

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)*

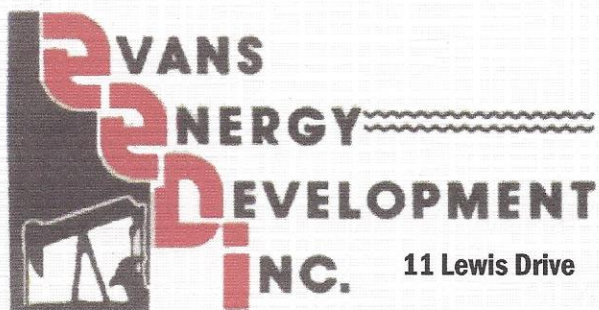
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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
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<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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling  
Water Wells  
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

**WELL LOG**

Kansas Resource Exploration & Development, LLC  
Kitchen #KR-17  
API # 15-121-29,983  
March 19 - March 20, 2014

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
12	soil & clay	12
5	shale	17
22	lime	39
25	shale	64
2	lime	66
35	shale	101 red bed
1	lime	102
4	shale	106
16	lime	122
10	shale	132
11	lime	143
2	shale	145
16	lime	161
9	shale	170
21	lime	191
5	shale	196
2	lime	198
2	shale	200
7	lime	207 base of the Kansas City
12	shale	219
6	sand	225 green sand, no oil, no gas
4	silty shale	229
5	shale	234
5	sand	239 green sand & shale, gassy
73	shale	312
3	limey sand	315 green hard sand
57	silty shale	372
9	lime	381
2	shale	383
5	lime	388
2	shale	390
8	silty shale	398
1	broken sand	399 15% green sand, 85% silty shale ok bleeding
23	shale	422
1	coal	423
5	shale	428

8	lime	436
13	shale	449
3	lime	452
17	shale	469
9	lime	478
17	shale	495
1	lime	496
5	shale	501
6	lime	507 oil show
4	shale	511
1.5	silty shale	512.5 few light brown sand seams minimal show
1.5	broken sand	514 80% brown sand 20% shale good bleeding
1	silty shale	515 green sandy shale few light brown sand seams no show
6.5	oil sand	521.5 brown sand good bleeding good saturation few thin shale seams
2	broken sand	523.5 90% brown sand 10% shale, light bleeding
2.5	shale	526
2	broken sand	528 30% brown sand 70% shale, no bleeding
3.5	shale	531.5
3.5	lime	535
46	shale	581
2	oil sand	583 hard brown sand light bleeding
4	grey sand	587
3	silty shale	590
10	shale	600 TD

Drilled a 9 7/8" hole to 21.1'

Drilled a 5 5/8" hole to 600'

Set 21.1' of 7" surface casing cemented with 5 sacks of cement

Set 590.8' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp, 1 baffle.

Baffle set 31.4' from bottom of tally.

**Core Times**

	<u>Minutes</u>	<u>Seconds</u>
512		46
513		39
514		44
515		42
516		35
517		39
518		37
519		46
520		45
521		49
522		38
523		43
524		40
525		39
526		39
527		48
528		50
529		50
530	1	39
531	1	52



PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

266890

TICKET NUMBER 42745

LOCATION Ottawa

FOREMAN Alan Mader

**FIELD TICKET & TREATMENT REPORT  
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3.21.14	44418	Kitchen KR-17	NE 13	18	21	M:

CUSTOMER  
Kansas Resources E+D

MAILING ADDRESS  
9393 W 110th

CITY  
Overland Park

STATE  
KS

ZIP CODE  
66210

TRUCK #	DRIVER	TRUCK #	DRIVER
730	Alan Mader	Safety	Meat
666	Gar M...		
370	Joe Pic		
570	Set Tue		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 600 CASING SIZE & WEIGHT 2 1/2

CASING DEPTH 590.8 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER 539.4 bf

SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING yes

DISPLACEMENT 3.25 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Help mooring. Customer was made aware that annulus was flowing. Established rate down casing. Mixed & pumped 100# gel followed by 5k 50/50 cement plus 2% gel and 1/2" Pheno seal per sack. Circulated cement. Flushed pump. Pumped plug to bottle. Well held 800 PSI. Set float. Circulation seemed to be stopped

Evans, Mitchell

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	666	1085.00
5406	20	MILEAGE	666	84.00
5402	590.8	CASING footage	666	
5407	13 min	ton miles	570	122.67
5502C	1 1/2	80 vhr	370	150.00
			954.50	
1124	83	50/50 cement	52.58	
1118B	239	gel	56.70	
1107A	42	Pheno seal		
		Material sub	1063.78	
		less 30%	-319.13	
		Material total		744.65
4402	1	2 1/2 plug		29.50
			2534.95	
			-319.13	2215.82
		SALES TAX		59.23
		ESTIMATED TOTAL		2275.05

Revin 3737

AUTHORIZATION [Signature]

TITLE [Signature]



**completed**

DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.