



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1199046
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: _____

1199046

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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REMIT TO
FINV
 Consolidated Oil Well Services, LLC
 Dept. 970
 P.O. Box 4346
 Houston, TX 77210-4346

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/467-8676
 Fax 620/431-0012

INVOICE Invoice # 266775

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Invoice Date: 03/24/2014 Terms: 0/30/10,n/30 Page 1

D & Z EXPLORATION
 901 N. ELM ST.
 P.O. BOX 159
 ST. ELMO IL 62458
 (618)829-3274

EAST GORDON I-12
 42727
 NW 27-14-22
 03-20-2014
 KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	133.00	11.5000	1529.50
1118B	PREMIUM GEL / BENTONITE	324.00	.2200	71.28
1111	SODIUM CHLORIDE (GRANULA	257.00	.3900	100.23
1110A	KOL SEAL (50# BAG)	665.00	.4600	305.90
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50

Sublet Performed	Description	Total
9996-120	CEMENT MATERIAL DISCOUNT	-602.07

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1085.00	1085.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.20	126.00
495 CASING FOOTAGE	927.00	.00	.00
558 MIN. BULK DELIVERY	1.00	368.00	368.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	100.00	200.00

Amount Due 3965.60 if paid after 04/03/2014

Parts:	2036.41	Freight:	.00	Tax:	105.79	AR	3319.13
Labor:	.00	Misc:	.00	Total:	3319.13		
Sublt:	-602.07	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

266775

TICKET NUMBER 42727
LOCATION Ottawa KS
FOREMAN Fred Mad

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-20-14	3392	East Gordon # I-12	NE 27	14	22	JO
CUSTOMER D & Z Exploration			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 910 N Elm ST			712 Fred Mad			
CITY STATE ZIP CODE St Elmo KS			495 Har Bee			
			675 Kai Det			
			558 Mat Coc			

JOB TYPE Log string HOLE SIZE 5 7/8 HOLE DEPTH 960 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 926.70 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 5.39 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Hold crew safety meeting. Establish pump rate. Mix & Pump 100%
 Gel Flush. Mix & Pump 133 sks 50/50 Poz Mix Cement 2 7/8 Gel
 5% Salt 5# Kal Seal/sk. Cement to surface. Flush pump & lines
 clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to
 800 PSI. Hold & Monitor pressure for 30 min MITI.
 Release pressure to set float valve. Shut in casing

TOS Drilling - Chad Weaver Fred Mad

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5404	1	PUMP CHARGE	495	1085.00 ✓
5406	30 mi	MILEAGE	495	126.00 ✓
5402	927	Casing footage		N/C ✓
5407	Minimum	Ten Miles	558	368.00 ✓
5502C	2 hrs	80 BBL Vac Truck	675	200.00 ✓
1124	133 sks	50/50 Poz Mix Cement	1529.50	✓
1118B	324#	Premium Gel	71.25	✓
1111	257#	Granulated Salt	100.23	✓
1110A	165	Kal Seal	305.90	✓
		Material	2006.91	
		Less - 30%	-602.07	
		Total Material		1404.84 ✓
4402	1	2 1/2" Rubber Plug		29.50 ✓
			3815.41	✓
			-602.07	3213.34 ✓
		7.375% SALES TAX		105.79 ✓
		ESTIMATED TOTAL		3319.13 ✓

Ravin 3737

AUTHORIZATION Don Decker TITLE _____ 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.

Johnson County, KS
Well: E. Gordon I-12
Lease Owner: D and Z Ex

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
03/19/2014

WELL LOG

Thickness of Strata	Formation	Total Depth
6	soil/clay	6
13	sandstone	19
12	shale	31
2	lime	33
25	shale	58
7	lime	65
5	shale	70
16	lime	86
10	shale	96
8	lime	104
7	shale	111
19	lime	130
17	sandy shale and sand	147
18	lime	165
8	shale	173
57	lime	230
22	shale	252
8	lime	260
19	shale	279
8	lime	287
3	shale	290
10	lime	300
34	shale	334
1	lime	335
11	shale	346
25	lime	371
8	shale	379
23	lime	402
5	shale	407
3	lime	410
5	shale	415
7	lime	422
5	shale	427
20	sandy shale	447
86	shale	533
7	sandy shale	540
36	shale	576
5	sand and sandy shale	581
15	shale	596
6	lime	602

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals $D^2 \times 1.4 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals $BPH \times PSI \times .0004$

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

* D - Diameter of Pump Sheave

* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

$$\text{BELT LENGTH} = 2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$$

* Need these to figure belt length

$$\text{TO FIGURE AMPS: } \frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$$

746 WATTS equal 1 HP

Log Book

Well No. # 1-12

Farm Coat Garden

KS Johnson
(State) (County)

27 14 22
(Section) (Township) (Range)

For D+2 Exploration
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

East Garden Farm: Johnson County

KS State; Well No. #1-12

Elevation 7047

Commenced Spuding 3-19, 2014

Finished Drilling 3-20, 2014

Driller's Name Chad Weaver

Driller's Name _____

Driller's Name _____

Tool Dresser's Name Gale Holcom

Tool Dresser's Name _____

Tool Dresser's Name _____

Contractor's Name ROS

27 14 22

(Section) (Township) (Range)

Distance from S line, 3520 ft.

Distance from E line, 4840 ft.

3. Secks

CASING AND TUBING RECORD

10" Set _____ 10" Pulled _____
 7 7/8" Set 23 3' 8" Pulled _____
 6 3/4" Set _____ 6 3/4" Pulled _____
 4" Set _____ 4" Pulled _____
 2 1/2" Set 926 70' 2" Pulled _____
960 TD

CAS

Feet

A large grid of graph paper is placed over the top portion of the casing and tubing record. The grid contains faint, illegible handwritten notes.

Thickness of Strata	Formation	Total Depth	Remarks
6	soil/clay	6	
13	sandstone	19	
12	shale	31	
2	Lime	33	
25	shale	58	
7	Lime	65	
5	shale	70	
16	Lime	86	
10	shale	96	
8	Lime	104	
7	shale	111	
19	Lime	130	
17	sandy shale & sand	147	
18	Lime	165	
8	shale	173	
57	Lime	230	
22	shale	252	
8	Lime	260	
19	shale	279	
8	Lime	287	
3	shale	290	
10	Lime	300	
34	shale	334	
1	Lime	335	
11	shale	346	
25	Lime	371	
8	shale	379	

Thickness of Strata	Formation	Total Depth	Remarks
23	Lime	402	
5	shale	407	
3	Lime	410	
5	shale	415	
7	Lime	422	
5	shale	427	Harder
20	sandy shale	447	
86	shale	533	
7	sandy shale	540	
36	shale	576	
5	sand & sandy shale	581	
15	shale	596	no oil
6	Lime	602	
3	shale	605	
2	Lime	607	
6	shale	613	
5	Lime	618	
9	sandy shale	627	
9	shale	636	
4	Lime	640	
9	shale	649	
7	Lime	656	
40	shale	696	red bed - 660'
26	sandy shale	722	
39	shale	761	
6	Broken sand	767	no oil
8	sandy shale	775	little oil, with some brown sand

775

Thickness of Strata	Formation	Total Depth	Remarks
15	shale	790	
3	Lime	793	
7	shale	800	
7	sand	807	grey, no oil
32	shale	839	
5	sand	844	grey, no oil
3	sandy shale	847	
35	shale	882	
3	sandy lime	885	odor, 60% - 80% oil, ok bleedings
2	sandy lime	887	15% - 20% o.i.
1	sand	888	25% o.i.
4	sand	892	30% - 40% o.i., good bleedings
1	sand	893	40% - 50% o.i.
1	sand	894	20% o.i.
2	Broken sand	896	no oil
8	sandy shale	904	
31	shale	935	
10	sand	945	
15	shale	960	TD