



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1199337  
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: \_\_\_\_\_

1199337

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

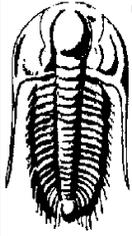
<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Daystar Petroleum, Inc.
Well Name	DENISE 2-28
Doc ID	1199337

Tops

Name	Top	Datum
ANHYDRITE	901	1066
BASE ANHYDRITE	928	1039
HEEBNER	3089	-1122
TORONTO	3106	-1139
DOUGLAS	3119	-1152
BROWN LIME	3171	-1204
LANSING	3183	-1216
BASE KANSAS CITY	3403	-1436
ARBUCKLE	3410	-1443





**TRILOBITE TESTING, INC.**

# DRILL STEM TEST REPORT

Daystar Petro. Inc.

**28-16-13, Barton, KS**

PO Box 560  
Eureka KS 67045

**Denise #2-28**

Job Ticket: 56184

**DST#: 2**

ATTN: Jim Musgrove

Test Start: 2014.02.11 @ 21:25:00

## GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 23:42:30

Time Test Ended: 03:54:45

Test Type: Conventional Bottom Hole (Reset)

Tester: Tim Phillips

Unit No: 59

**Interval: 3426.00 ft (KB) To 3433.00 ft (KB) (TVD)**

Reference Elevations: 1967.00 ft (KB)

Total Depth: 3433.00 ft (KB) (TVD)

1954.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 13.00 ft

**Serial #: 8018**

**Inside**

Press @ Run Depth: 913.34 psig @ 3430.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.02.11

End Date:

2014.02.12

Last Calib.:

2014.02.12

Start Time: 21:25:05

End Time:

03:54:44

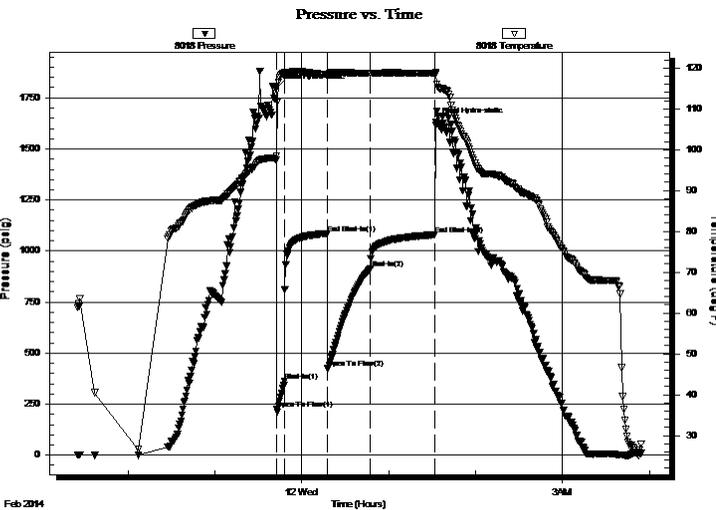
Time On Btm:

2014.02.11 @ 23:42:15

Time Off Btm:

2014.02.12 @ 01:32:15

**TEST COMMENT:** IFP-5- BOB in 30 secs  
ISI-30- Blow back built to 1/8 in then died back  
FF-30- BOB in 30 sec  
FSI-45- Dead no blow back



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1796.91	97.40	Initial Hydro-static
1	223.34	98.51	Open To Flow (1)
6	361.39	118.72	Shut-In(1)
35	1085.47	118.39	End Shut-In(1)
36	424.92	118.03	Open To Flow (2)
65	913.34	118.70	Shut-In(2)
110	1079.27	118.70	End Shut-In(2)
110	1631.40	118.92	Final Hydro-static

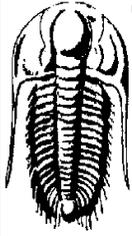
## Recovery

Length (ft)	Description	Volume (bbl)
2000.00	VWCM 2%Mud 98%Water	28.05

## Gas Rates

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

\* Recovery from multiple tests



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Daystar Petro. Inc.

**28-16-13, Barton, KS**

PO Box 560  
Eureka KS 67045

**Denise #2-28**

Job Ticket: 56184

**DST#: 2**

ATTN: Jim Musgrove

Test Start: 2014.02.11 @ 21:25:00

## 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: 55.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.79 in<sup>3</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: inches

## Recovery Information

Recovery Table

Length ft	Description	Volume bbl
2000.00	VWCM 2%Mud 98%Water	28.055

Total Length: 2000.00 ft      Total Volume: 28.055 bbl

Num Fluid Samples: 0

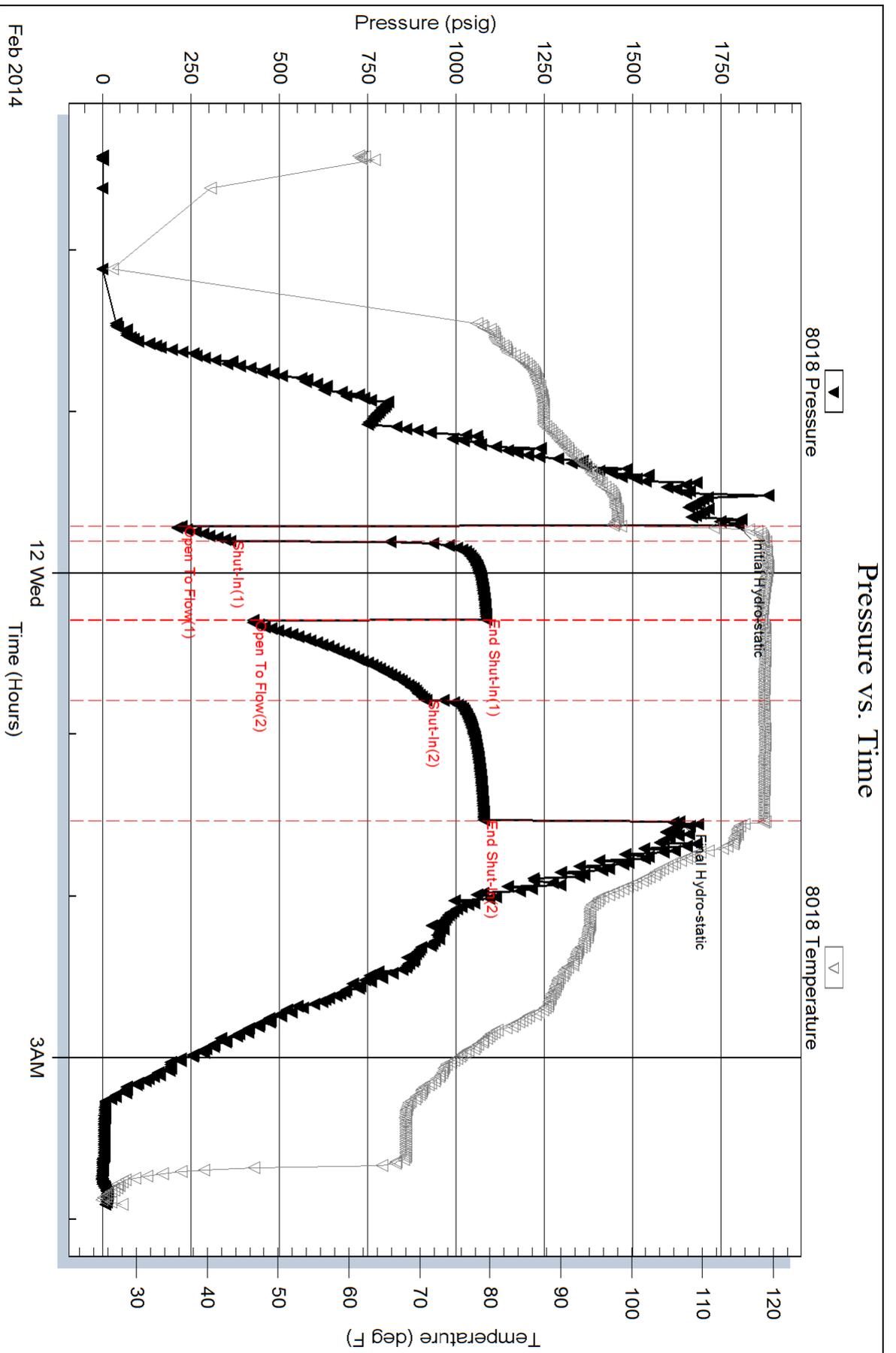
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



# ALLIED OIL & GAS SERVICES, LLC 062648

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Asset Band Pt

DATE <u>2-13-14</u>	SEC. <u>28</u>	TWP. <u>16</u>	RANGE <u>13</u>	CALLED OUT <u>10:00 PM</u>	ON LOCATION <u>7:45 PM</u>	JOB START <u>1:30 AM</u>	JOB FINISH <u>3:00 AM</u>
LEASE <u>Devise</u>		WELL # <u>2-28</u>		LOCATION <u>Houston 7 North 4 East</u>		COUNTY <u>Barton</u>	STATE <u>Km</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				North into			

CONTRACTOR Nimmergh Arly OWNER Some

TYPE OF JOB Production

HOLE SIZE 7 7/8 T.D. 3482'

CASING SIZE 5 1/2 DEPTH 3474'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX 1000 # MINIMUM 600 #

MEAS. LINE \_\_\_\_\_ SHOE JOINT 21.57'

CEMENT LEFT IN CSG. 26.57'

PERFS. \_\_\_\_\_

DISPLACEMENT 82.16

CEMENT			
AMOUNT ORDERED <u>145 lb ASC, 270 lb 10% Salt, 670 lb mixed, 5 # Kellogg - 50 lb 6740 470 xel, 500 gal W 1100, 8 gal KCL</u>			
COMMON	<u>30</u>	@ <u>17.90</u>	<u>537.00</u>
POZMIX	<u>20</u>	@ <u>9.35</u>	<u>187.00</u>
GEL	<u>2</u>	@ <u>23.40</u>	<u>46.80</u>
CHLORIDE		@	
ASC	<u>145</u>	@ <u>20.98</u>	<u>3030.50</u>
<u>Gilsonite</u>	<u>725</u>	@ <u>.98</u>	<u>710.50</u>
<u>Du-1100</u>		@ <u>58.70</u>	<u>704.90</u>
<u>KCL</u>	<u>8</u>	@ <u>34.40</u>	<u>275.20</u>
		@	
		@	
		@	
		@	
HANDLING	<u>248.37</u>	@ <u>2.48</u>	<u>615.92</u>
MILEAGE	<u>207.47</u>	@ <u>2.60</u>	<u>539.42</u>
			TOTAL <u>6646.77</u>

EQUIPMENT

PUMP TRUCK CEMENTER Tom Anderson

# 366 HELPER Kevin Gaddy

BULK TRUCK

# 609-239 DRIVER Don Cooper

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

Ran 3474' of 5 1/2" cas. Bore circulation circulated 1 1/2 hrs. Pumped 5 bbls H2O. 500 gal Du 1100, 5 bbls H2O. Plugged Reithole w/ 30 lb 670 xel, 5 # Kellogg w/ 20 gal 6740 470 xel. Hooped back to org. Mixed 145 lb ASC, 270 lb 10% salt, 670 lb mixed, 5 # Kellogg. Worked line clean. Released Plug. New plug w/ H2O & KCL. Landed Plug at 1000'. Released a float. Held.

SERVICE

DEPTH OF JOB	<u>3474'</u>		
PUMP TRUCK CHARGE	<u>2558.75</u>		
EXTRA FOOTAGE	@		
MILEAGE	<u>Num 20</u>	@ <u>7.70</u>	<u>154.00</u>
MANIFOLD	<u>Num 20</u>	@ <u>4.40</u>	<u>88.00</u>
<u>Head Rent</u>		@ <u>275.00</u>	<u>275.00</u>
<u>Protecting Head</u>		@ <u>100.00</u>	<u>100.00</u>
			TOTAL <u>3175.75</u>

CHARGE TO: Daystar Petroleum

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

<u>5 1/2" A-FV Float Sub</u>	@ <u>545.00</u>	<u>545.00</u>
<u>Latchdown Plug</u>	@ <u>660.00</u>	<u>660.00</u>
<u>8-Centimeter</u>	@ <u>57.00</u>	<u>456.00</u>
<u>1-Basket</u>	@ <u>395.00</u>	<u>395.00</u>
	@	
		TOTAL <u>2056.00</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 Charles Schmidt

SIGNATURE Charles Schmidt

SALES TAX (if Any) \_\_\_\_\_

TOTAL CHARGES 11,878.53

DISCOUNT 2,750.30 IF PAID IN 30 DAYS

9,128.23

# D&S CASING, LLC

620-793-7356

P.O. BOX 1438

GREAT BEND, KANSAS 67530

5164

Date 02/08/2014

Company Danstar Petroleum Called By \_\_\_\_\_  
Address 522 N. Main St. PO Box 550 Eureka, KS 67045+0560  
Lease Denise Well No. 2-28 County Barton  
Drilling Co. Ninnescah Rig No. 1

## SERVICE REPORT

Casing	<u>Ran 922 ft of 8 5/8" casing</u>	Amount:	<u>1465.00</u>		
Tool Rental	<u>Slips, Elevators,</u>	Amount:	<u>330.00</u>		
Hourly Work		Amount:			
Transportation Charge	<u>40 RT</u>	Miles @	Per Mile	Amount:	<u>100.00</u>
Waiting Time		Hours @	Amount:	<u>1895.00</u>	
Misc.		Amount:			

Tong Operator C. Frimmel  
Helpers B. Moses, G. Archer, W. Eller Amount: \_\_\_\_\_

## TOTAL SERVICE CHARGE

Remarks: Truck No. 1 arrived @ 10:20 pm completed @ 2:40 AM  
4 man crew Ran 922 ft of 8 5/8" casing

Responsible Party:

Date Work Commenced 02/07/2014 Date Work Completed 02/08/2014

By: Richard A. Boney