



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1201069
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: _____

1201069

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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REMIT TO
 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 # 267254

=====
 Invoice Date: 04/10/2014 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

SUGAR RIDGE FARMS 5-2
 47035
 SW 28-14-22
 04-08-2014
 KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	123.00	11.5000	1414.50
1118B	PREMIUM GEL / BENTONITE	307.00	.2200	67.54
1111	SODIUM CHLORIDE (GRANULA	238.00	.3900	92.82
1110A	KOL SEAL (50# BAG)	615.00	.4600	282.90
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50

Sublet Performed	Description	Total
9996-120	CEMENT MATERIAL DISCOUNT	-557.33

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	897.00	.00	.00
510 MIN. BULK DELIVERY	1.00	368.00	368.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	100.00	200.00

Amount Due 3805.45 if paid after 04/20/2014

Parts:	1887.26	Freight:	.00	Tax:	98.09	AR	3207.02
Labor:	.00	Misc:	.00	Total:	3207.02		
Sublt:	-557.33	Supplies:	.00	Change:	.00		

Signed _____ Date _____



267254

TICKET NUMBER 47035

LOCATION Ottawa K.S

FOREMAN Fred Mader

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
4.8.14	3392	Sugar Ridge Form # 5.2	SW 28	14	22	JO

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fred Mad		
495	Har Bec		
675	Ki Det		
510	Set Tuc		

CUSTOMER: D & Z Exploration
 MAILING ADDRESS: 910 N Elm St.
 CITY: St Elmo STATE: IL ZIP CODE: 62458

JOB TYPE: Longstring HOLE SIZE: 5 7/8 HOLE DEPTH: 940' CASING SIZE & WEIGHT: 2 7/8
 CASING DEPTH: 897' DRILL PIPE: _____ TUBING: _____ OTHER: _____
 SLURRY WEIGHT: _____ SLURRY VOL: _____ WATER gal/sk: _____ CEMENT LEFT in CASING: 2 1/2" Plug
 DISPLACEMENT: 5.2180 DISPLACEMENT PSI: _____ MIX PSI: _____ RATE: 5 BPM

REMARKS: Hold crew safety meeting. Establish pump rate. Mix & Pump 100# Coal Flush. Mix & Pump 123 sks 50/50 Poz Mix Cement 290 Gal 5% salt 5# Kol 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 MIT. Release pressure to set float valve. Shut in casing.

Evans Energy Dev. Inc. - Travis Fred Mader

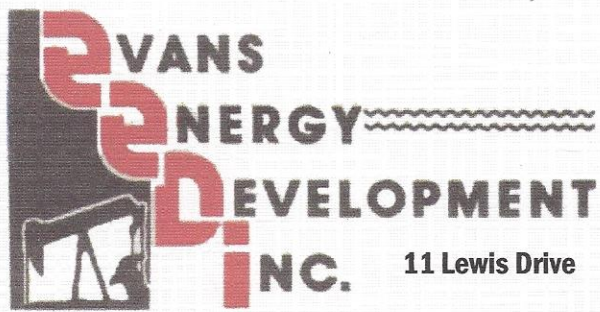
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085.00 ✓
5406	30 mi	MILEAGE	495	126.00 ✓
5402	897'	Casing footage		N/C ✓
5407	Minimum	Ton Miles	510	368.00 ✓
5502C	2 hrs	80 BBL Vac Truck	675	200.00 ✓
1124	123 sks	50/50 Poz Mix Cement	1414.50	✓
1118B	307#	Premium Gel	675#	✓
1111	238#	Granulated Salt	92.82	✓
1110A	615#	Kol Seal	282.80	✓
		Material	1857.76	✓
		Less 30%	-557.33	✓
		Total Material		1300.43 ✓
4402	1	2 1/2" Rubber Plug		29.50 ✓
			3805.45	
			7.375%	
		SALES TAX		98.09 ✓
		ESTIMATED TOTAL		3207.02 ✓

Completed

Ravin 3737

AUTHORIZATION: Don Beckwith 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



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

D & Z Exploration, Inc.
Sugar Ridge Farms #S2
API # 15-091-24,286
April 7 - April 8, 2014

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
18	soil & clay	18
4	shale	22
3	lime	25
2	shale	27
20	lime	47
6	shale	53
10	lime	63
6	shale	69
22	lime	91
20	shale	111
22	lime	133
15	shale	148
10	lime	158
11	shale	169
34	lime	203
15	shale	218
8	lime	226
21	shale	247
7	lime	254
4	shale	258
8	lime	266
45	shale	311
24	lime	335
7	shale	342
23	lime	365
6	shale	371
15	lime	386 base of the Kansas City
27	shale	413
10	sand	423
137	shale	560
7	lime	567
3	shale	570
3	lime	573
1	shale	574
1	coal	575
6	shale	581
9	lime	590

12	shale	602
4	lime	606
4	shale	610
3	lime	613
33	shale	646
7	lime	653
7	shale	660
3	lime	663
2	shale	665
8	sand	673 white, no oil
56	shale	729
1	oil sand	730 brown ok bleeding
1	limey sand	731 brown & white ok bleeding
4	broken oil sand	735 brown & grey light bleeding
13	silty shale	748
8	shale	756
1	coal	757
93	shale	850
3	limey oil sand	853 brown & white good bleeding
4	oil sand	857 brown good bleeding
2	limey oil sand	859 brown & white good bleeding
4	broken sand	863 white & grey no oil
40	shale	903
37	silty shale	940 TD

Drilled a 9 7/8" hole to 21.3'

Drilled a 5 5/8" hole to 940'

Set 21.3' of 7" surface casing cemented with 5 sacks of cement.

Set 897.5' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp