



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1204196
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: _____

1204196

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> _____
---	--

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Taos Resources Operating Company LLC
Well Name	Brothers Dairy 7-1
Doc ID	1204196

Tops

Name	Top	Datum
Topeka	1182	171
Iaton Lime	1867	-514
Stalnaker	1953	-600
KC Lime	2464	-1111
Marmaton Lime	2666	-1313
Cherokee	2800	-1447
Miss Chert	3072	-1719
T Miss Lime	3073	-1720
Reed Springs	3443	-2090
Kinderhook Shale	3497	-2144
Woodford	3507	-2154



CONSOLIDATED
Oil Well Services, LLC

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 # 263960

Invoice Date: 11/18/2013 Terms: 0/0/30,n/30

Page 1

TAOS RESOURCES OPERATING, LLC
1455 WEST LOOP SOUTH, ST. 600
HOUSTON TX 77054
(713)993-0774

BROTHERS DAIRY 7-1
43727
7-32-6E
11-12-2013
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	225.00	15.7000	3532.50
1102	CALCIUM CHLORIDE (50#)	550.00	.7800	429.00
1118B	PREMIUM GEL / BENTONITE	450.00	.2200	99.00
1107	FLO-SEAL (25#)	125.00	2.4700	308.75
4432	8 5/8" WOODEN PLUG	1.00	84.0000	84.00

Description	Hours	Unit Price	Total
467 CEMENT PUMP (SURFACE)	1.00	870.00	870.00
467 EQUIPMENT MILEAGE (ONE WAY)	48.00	4.20	201.60
681 MIN. BULK DELIVERY	1.00	368.00	368.00

Copy Steps in Line

175D409
B30.130
atufik

Parts:	4453.25	Freight:	.00	Tax:	285.02	AR	6177.87
Labor:	.00	Misc:	.00	Total:	6177.87		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



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

263960

TICKET NUMBER 43727
LOCATION 180
FOREMAN Jacob Storm

FIELD TICKET & TREATMENT REPORT

CEMENT

Op: 15-035-24537-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-12-13	2871	Brothers Dairy 2-1	7	32	6E	Cowley
CUSTOMER		Taos Resources				
MAILING ADDRESS		1455 west Loop south #600				
CITY	STATE	ZIP CODE				
Houston	TX	77254				

TRUCK #	DRIVER	TRUCK #	DRIVER
467	Josh		
681	Bill H		
702	Jacob		

JOB TYPE Surface B HOLE SIZE 22 1/4 HOLE DEPTH 350 CASING SIZE & WEIGHT 25/8
 CASING DEPTH 248 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15 16 SLURRY VOL 54.46 WATER gal/sk _____ CEMENT LEFT in CASING 16ft
 DISPLACEMENT 21.78 DISPLACEMENT PSI 300 MIX PSI 50 RATE 6.6 bpm

REMARKS: Safety meeting Break circulation pump 10 bbl flush
mix 225 lbs class A 2% gel 3% cc 5% kd seal displaced with
21 bbl circulating cement to surface shut in

18 BBI Slury to surface

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	870.00	870.00 ✓
5406	48	MILEAGE	4.20	201.60 ✓
5407	1	min bulk delivery	368.00	368.00 ✓
11045	225	class A	15.70	3532.50 ✓
1102	550	calcium chloride	1.78	429.00 ✓
1118B	450	gel	1.22	99.00 ✓
1107	125	poly-Flake	2.47	308.75 ✓
4432	1	8 5/8 wooden plug	84.00	84.00 ✓
Subtotal				5842.85
SALES TAX <u>6.4</u>				285.02 ✓
ESTIMATED TOTAL				6177.87 ✓

completed

WIN 3757

AUTHORIZATION Chris Hays

TITLE Operations Manager

DATE 11/12/13

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.



CONSOLIDATED
Oil Well Services, LLC

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 # 264098

Invoice Date: 11/20/2013 Terms: 0/0/30,n/30

Page 1

TAOS RESOURCES OPERATING, LLC
1455 WEST LOOP SOUTH, ST. 600
HOUSTON TX 77054
(713)993-0774

BROTHERS DAIRY 7-1
43728
7-33S-6E
11-18-2013
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	250.00	15.7000	3925.00
1102	CALCIUM CHLORIDE (50#)	500.00	.7800	390.00
1110A	KOL SEAL (50# BAG)	2000.00	.4600	920.00
1118B	PREMIUM GEL / BENTONITE	750.00	.2200	165.00
4114	RECIPROCATING CEMENT BAS	4.00	290.0000	1160.00
4136	TURBOLIZER 5 1/2"	8.00	75.7500	606.00
4159	FLOAT SHOE AFU 5 1/2"	1.00	433.7500	433.75
4454	5 1/2" LATCH DOWN PLUG	1.00	500.0000	500.00
1144G	MUD FLUSH (SALE)	500.00	1.1000	550.00

Description	Hours	Unit Price	Total
491 MIN. BULK DELIVERY	1.00	368.00	368.00
57 CEMENT PUMP	1.00	1085.00	1085.00
57 EQUIPMENT MILEAGE (ONE WAY)	45.00	4.20	189.00
57 CASING FOOTAGE	1650.00	.23	379.50

1750409
840.130
Steph

Copy Step A/Sim

Parts: 8649.75 Freight: .00 Tax: 553.58 AR 11224.83
Labor: .00 Misc: .00 Total: 11224.83
Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



264098

TICKET NUMBER 43728
 LOCATION 180
 FOREMAN Jacob Storm

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

FIELD TICKET & TREATMENT REPORT
 CEMENT

15-035-24537-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
11-18-13	2871	Brothers Dairy 7-1	7	33S	6E	Cowley																
CUSTOMER TAOS Resources																						
MAILING ADDRESS 1455 west Loop South St 600																						
CITY Houston		STATE TX	ZIP CODE 77254																			
<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>57</td> <td>Josh</td> <td></td> <td></td> </tr> <tr> <td>491</td> <td>Tracy</td> <td></td> <td></td> </tr> <tr> <td>702</td> <td>Jacob</td> <td></td> <td></td> </tr> </tbody> </table>							TRUCK #	DRIVER	TRUCK #	DRIVER	57	Josh			491	Tracy			702	Jacob		
TRUCK #	DRIVER	TRUCK #	DRIVER																			
57	Josh																					
491	Tracy																					
702	Jacob																					

JOB TYPE Longstring B HOLE SIZE 2 7/8 HOLE DEPTH 3650 CASING SIZE & WEIGHT 5 1/2
 CASING DEPTH 3650 DRILL PIPE TUBING OTHER
 SLURRY WEIGHT 15 lb SLURRY VOL 65.42 WATER gal/sk 6.46 CEMENT LEFT in CASING 44 1/2 shoc
 DISPLACEMENT 85.82 DISPLACEMENT PSI 800 MIX PSI 50 RATE 5.1 bpm

REMARKS: Safety meeting, cementer on 1, 5, 10, 15, 20, 25, 30, 35. Baskets on 3, 8, 16, 38, pump 5 bbl water 10 bbl Dr 1100 5 bbl water mix 240 lbs class A 3/8 gel 2/1 cc 8/16ed seal dis placed with 85.82 bbl landing plug at 1450 psi check float float held plug Root hole Job complete.

45000 GOOD JOB!!

800 PSI LEFT

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00
5406	4/5	MILEAGE	4.20	189.00
5407	1	min bulk delivery	368.00	368.00
5402	16.50	footage	23	379.50
1104S	250	Class A	15.70	3925.00
1102	500	calcium chloride	.78	390.00
1110A	2000	kol-seal	.46	920.00
1118B	750	gel	.22	165.00
4114	4	Baskets 5 1/2	290.00	1160.00
4136	8	5 1/2 tribo lizer	75.75	606.00
4159	1	5 1/2 weatherford AFK shoc	433.75	433.75
4454	1	5 1/2 Latch down plug weatherford	500.00	500.00
11440	500	Dr 1100	1.10	550.00
<input checked="" type="checkbox"/> completed			Subtotal	10671.25
			SALES TAX	553.58
			ESTIMATED TOTAL	11224.83

Ravin 3737

AUTHORIZATION

TITLE TAOS REP

DATE 11/18/2013

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.

HYDRAULIC FRACTURING FLUID PRODUCT COMPONENT INFORMATION DISCLOSURE



Last Fracture Date:	12/4/2013
County:	Cowley
API Number (14 Digits):	15-035-24537-00-00
Operator Name:	Taos Resources Operating Company, LLC
Well Name and Number:	Brothers Dairy 7-1
Latitude:	
Longitude:	
Datum:	
Production Type:	Oil
True Vertical Depth (TVD):	3650
Total Base Fluid Volume (gal)*:	266,700

Hydraulic Fracturing Fluid Composition:

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS#)	Maximum Ingredient Concentration in Additive (% by mass)**	Maximum Ingredient Concentration in HF Fluid (% by mass)**	Authorized Representative's Name, Address and Phone Number
SP-902		Friction Reducer	Hydrotreated Light Distillate	064742-47-8	35%	0.00%	
			Petroleum Distillate	064742-94-5	40%	0.00%	
15% HCL		Acid	Hydrogen Chloride	7647-01-0	38%	1.05%	
AI-260		Inhibitor	Ethylene Glycol	107-21-1	20%	0	
			N.N - Dimethyl Formamide	68-12-2	20%	0	
			2-Butoxyethanol	111-76-2	5%	0	
AR-104		Retarder	Methanol	67-56-1	Confidential	na	Tony Carpenter 278 CR 2706 Bartlesville, OK 74003 (918) 331-7133
SR-445		Surfactant	Isopropanol	67-63-0	Confidential	na	Tony Carpenter 278 CR 2706 Bartlesville, OK 74003 (918) 331-7133
Biostat 650		Biocide	Methanol	67-56-1	20%	0	
			Isopropanol	67-63-0	5%	0	
SP-950		Iron Control	Citric Acid	77-92-9	Confidential	na	Tony Carpenter 278 CR 2706 Bartlesville, OK 74003 (918) 331-7133

Ingredients shown above are subject to 29 CFR 1910.1200(i) and appear on Material Safety Data Sheets (MSDS). Ingredients shown below are Non-MSDS.

40/70 White Sand		Proppant	Quartz (Crystalline Silicate)	14808-60-7		2.41%	
100 MESH		Proppant	Quartz (Crystalline Silicate)	14808-60-7		0.34%	

*Total Water Volume sources may include fresh water, produced water, and/or recycled water. **Information is based on the maximum potential for concentration and thus the total may be over 100%. Ingredient information for chemicals subject to 29 CFR 1910.1200(i) and Appendix D are obtained from suppliers' Material Safety Data Sheets (MSDS).

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

May 15, 2014

Chris Haefele
Taos Resources Operating Company LLC
1455 W LOOP S
SUITE 600
HOUSTON, TX 77027

Re: ACO-1
API 15-035-24537-00-00
Brothers Dairy 7-1
SW/4 Sec.07-32S-06E
Cowley County, Kansas

Dear Chris Haefele:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/12/2013 and the ACO-1 was received on May 12, 2014 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department