



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1205706  
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: \_\_\_\_\_

1205706

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)*

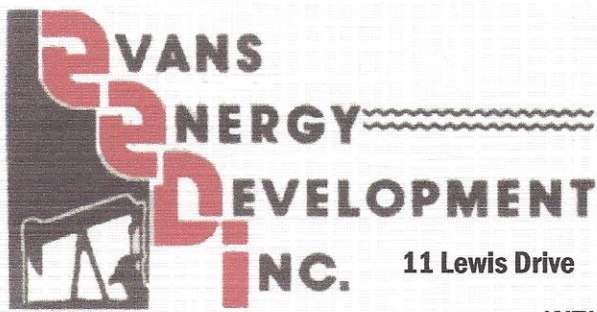
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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

<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

Joeckel #KR-20

API # 15-121-30,064

April 23 - April 29, 2014

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
5	soil & clay	5
5	shale	10
20	lime	30
92	shale	122
36	lime	158
20	shale	178
6	lime	184
33	shale	217
14	lime	231
13	shale	244
12	lime	256
2	shale	258
10	lime	268
13	shale	281
15	lime	296
4	shale	300
3	lime	303
3	shale	306
2	lime	308
3	shale	311
5	lime	316 base of the Kansas City
33	shale	349
4	broken sand	353
111	shale	464
1	lime	465
4	limey sand	469 hard brown, ok bleeding
9	limey sand	478 50% limey, 50% brown sand, very good bleeding
1	lime	479
6	silty shale	485
2	broken sand	487 90% sand 10% shale, good bleeding
5	oil sand	492 brown sand, good saturation and bleeding
2	lime	494
1	limey sand	495 black limey sand, good bleeding
1	lime	496
12	shale	508
7	lime	515 light oil show
9	shale	524
5	lime	529
11	shale	540
4	lime	544

19	shale	563
2	lime	565
14	shale	579
2	lime	581
22	shale	603
3	lime	606
11	shale	617
3	lime	620
35	shale	655
23	broken sand	678 light brown sand & shale, light oil odor, making water
7	broken sand	685 light brown sand & shale, light oil odor, making water
13	sand	698 light brown sand
1	coal	699
14	shale	713
2	broken sand	715 30% sand 70% shale, light bleeding
2.5	silty shale	717.5
3.5	broken sand	721 40% sand 60% shale, ok bleeding
4	oil sand	725 brown, good bleeding
2.5	oil sand	727.5 brown, ok bleeding
1	broken sand	728.5 90% brown sand 10% shale, ok bleeding
5.5	oil sand	734 ok bleeding
3.5	oil sand	737.5 dark sand, good bleeding
7.5	oil sand	745 dark sand, good bleeding
3	oil sand	748 black sand, good bleeding
2	lime/sand	750
3	shale	753
1	coal	754
53	shale	807 TD

Drilled a 9 7/8" hole to 23.6'

Drilled a 5 5/8" hole to 807'

Set 23.6' of 7" surface casing cemented with 6 sacks of cement

Set 796.8' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp and 1 baffle.

Baffle set 31.65' from bottom of tally.

## Core Times

	<u>Minutes</u>	<u>Seconds</u>
717		21
718		18
719		34
720		40
721		33
722		37
723		34
724		36
725		36
726		43
727		49
728		48
729		55
730		42
731		38
732		43
733		42
734		38
735		38
735		40



**CONSOLIDATED**  
Oil Well Services, LLC

267792

TICKET NUMBER 47130

LOCATION Ottawa

FOREMAN Alan Mada

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
4.29.14	4448	Speckel KR-20	SW 13	17	22	MI

CUSTOMER		TRUCK #		DRIVER	
Kansas Resources E+D		730	368	Alan Mada	Safety Meet
MAILING ADDRESS		368	369	Art Mad	Der Mas
9393 W10 <sup>th</sup>		558		Mat Loc	
CITY					
Overland Park	STATE	ZIP CODE			
	KS	66210			

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 807 CASING SIZE & WEIGHT 2 7/8  
 CASING DEPTH 796.80 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER 765.15 BF  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING yes  
 DISPLACEMENT 4.44 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Held meeting. Established rate. Mixed & pumped 100 # gel followed by 110 sk 50/50 cement plus 2% gel & 1/2 # phenol seal per sack. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PSI. Set float. Extra 80 vac time due to extreme mud.

Evans Mitchell

Alan Mada

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085 <sup>00</sup>
5406	—	MILEAGE	268	—
5402	796.80	Casing footage	368	—
5407	1/2 min	ton miles	558	184 <sup>00</sup>
5502C	3	80 vac	369	300 <sup>00</sup>
1124	110	50/50 cement	1265 <sup>00</sup>	
1118B	285 #	gel	62.70	
1107A	55 #	phenoseal	74.25	
		material sub	1401.95	
		less 30% - 420.59		
		material total		981.36
4402	1	2 1/2 plug		29.50
			3109.96	
		SALES TAX		77.33
		ESTIMATED TOTAL		2657.19

Revin 3737

NO COMPANY VED

AUTHORIZATION

Jim OK'd

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