



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1205900  
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: \_\_\_\_\_

1205900

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:  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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Achenbach L 1
Doc ID	1205900

All Electric Logs Run

Dual Induction
Neutron Density w/PE
Micro
Sonic

Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Achenbach L 1
Doc ID	1205900

Tops

Name	Top	Datum
Heebner	3922	-2440
KC	4440	-2958
BKC	4692	-3210
Chero Sh	4824	-3342
Miss	4886	-3404
Viola	5402	-3920
Simp Sh	5506	-4024
Arb	5688	-4206
LTD	5754	-4272



# INVOICE

PO Box 93999  
Southlake, TX 76092

RECEIVED

Invoice Number: 141284

FEB 15 2014

Invoice Date: Feb 8, 2014

Page: 1

Voice: (817) 546-7282

Fax: (817) 246-3361

<b>Bill To:</b>
Lotus Operating Co., LLC Lotus Exploration Co. 100 S. Main, STE 420 Wichita, KS 67202

Customer ID	Field Ticket #	Payment Terms	
Lotus	62293	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Feb 8, 2014	3/10/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Achenbach L #1		
135.00	CEMENT MATERIALS	Class A Common	17.90	2,416.50
90.00	CEMENT MATERIALS	Pozmix	9.35	841.50
4.00	CEMENT MATERIALS	Gel	23.40	93.60
8.00	CEMENT MATERIALS	Chloride	64.00	512.00
241.81	CEMENT SERVICE	Cubic Feet Charge	2.48	599.69
284.44	CEMENT SERVICE	Ton Mileage Charge	2.60	739.54
1.00	CEMENT SERVICE	Surface	1,512.75	1,512.75
28.00	CEMENT SERVICE	Pump Truck Mileage	7.70	215.60
28.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	123.20
1.00	CEMENT SUPERVISOR	Carl Balding		
1.00	EQUIPMENT OPERATOR	Scott Priddy		

ENTERED  
FEB 15 2014

GL# 9208  
DESC. CEMENT SURF  
CSG  
WELL # Achen L

Subtotal	7,054.38
Sales Tax	276.25
Total Invoice Amount	7,330.63
Payment/Credit Applied	
<b>TOTAL</b>	<b>7,330.63</b>

ALL PRICES ARE NET, PAYABLE  
30 DAYS FOLLOWING DATE OF  
INVOICE. 1 1/2% CHARGED  
THEREAFTER. IF ACCOUNT IS  
CURRENT, TAKE DISCOUNT OF

\$ 1,269.79

ONLY IF PAID ON OR BEFORE

Mar 5, 2014

- 1269.79  
6060.84





# INVOICE

PO Box 93999  
Southlake, TX 76092

Invoice Number: 141386

Invoice Date: Feb 15, 2014

Voice: (817) 546-7282

Page: 1

Fax: (817) 246-3361

**Bill To:**

Lotus Operating Co., LLC  
Lotus Exploration Co.  
100 S. Main, STE 420  
Wichita, KS 67202

RECEIVED

FEB 22 2014

Customer ID	Field Ticket #	Payment Terms	
Lotus	62621	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Great Bend	Feb 15, 2014	3/17/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Achenbach L #1		
30.00	CEMENT MATERIALS	Class A Common	17.90	537.00
20.00	CEMENT MATERIALS	Pozmix	9.35	187.00
1.00	CEMENT MATERIALS	Gel	23.40	23.40
125.00	CEMENT MATERIALS	ASC	20.90	2,612.50
625.00	CEMENT MATERIALS	Kol Seal	0.98	612.50
25.00	CEMENT MATERIALS	Flo Seal	2.97	74.25
58.00	CEMENT MATERIALS	FL-160	18.90	1,096.20
17.00	CEMENT MATERIALS	Defoamer	9.80	166.60
216.14	CEMENT SERVICE	Cubic Feet Charge	2.48	536.03
260.40	CEMENT SERVICE	Ton Mileage Charge	2.60	677.04
1.00	CEMENT SERVICE	Production Casing	3,149.78	3,149.78
28.00	CEMENT SERVICE	Pump Truck Mileage	7.70	215.60
1.00	CEMENT SERVICE	Manifold Rental	275.00	275.00
28.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	123.20
1.00	EQUIPMENT SALES	5-1/2 Rubber Plug	85.00	85.00
1.00	EQUIPMENT SALES	5-1/2 Guide Shoe	281.00	281.00
1.00	EQUIPMENT SALES	5-1/2 AFU Insert	365.00	365.00
5.00	EQUIPMENT SALES	5-1/2 Centralizer	57.00	285.00
1.00	EQUIPMENT SALES	5-1/2 Basket	395.00	395.00
1.00	CEMENT SUPERVISOR	Charles Kinyon		

ALL PRICES ARE NET, PAYABLE  
30 DAYS FOLLOWING DATE OF  
INVOICE. 1 1/2% CHARGED  
THEREAFTER. IF ACCOUNT IS  
CURRENT, TAKE DISCOUNT OF

\$ 2,057.21

ONLY IF PAID ON OR BEFORE

Mar 12, 2014

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
<b>TOTAL</b>	<b>Continued</b>



PO Box 93999  
Southlake, TX 76092

Voice: (817) 546-7282  
Fax: (817) 246-3361

# INVOICE

Invoice Number: 141386  
Invoice Date: Feb 15, 2014  
Page: 2

**Bill To:**  
Lotus Operating Co., LLC  
Lotus Exploration Co.  
100 S. Main, STE 420  
Wichita, KS 67202

RECEIVED  
FEB 22 2014

<b>Customer ID</b>	<b>Field Ticket #</b>	<b>Payment Terms</b>	
Lotus	62621	Net 30 Days	
<b>Job Location</b>	<b>Camp Location</b>	<b>Service Date</b>	<b>Due Date</b>
KS1-02	Great Bend	Feb 15, 2014	3/17/14

Quantity	Item	Description	Unit Price	Amount
1.00	CEMENT SUPERVISOR	Tim Dickson		
1.00	OPERATOR ASSISTANT	Josh Ellis		

GL# 9308  
 DESC. CEMENT PAID CSS  
 \_\_\_\_\_  
 \_\_\_\_\_  
 WELL # Achenl

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2,057.21

ONLY IF PAID ON OR BEFORE

Mar 12, 2014

Subtotal	11,697.10
Sales Tax	480.51
Total Invoice Amount	12,177.61
Payment/Credit Applied	
<b>TOTAL</b>	<b>12,177.61</b>

ENTERED  
FEB 24 2014

- 2,057.21  
10,120.40



# ALLIED OIL & GAS SERVICES, LLC 062621

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:  
great Bend

DATE <u>2-15-14</u>	SEC. <u>11</u>	TWP. <u>35</u>	RANGE <u>13</u>	CALLED OUT <u>5 pm</u>	ON LOCATION <u>9 pm</u>	JOB START <u>1:00 am</u>	JOB FINISH <u>2:15 am</u>
LEASE <u>ackerback 12</u>		WELL # <u>1</u>		LOCATION <u>Hardtner 3 west</u>		COUNTY <u>Baker</u>	STATE <u>Tx</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<u>south date</u>			

CONTRACTOR Duke #7  
 TYPE OF JOB Production  
 HOLE SIZE 7 7/8 14 T.D. 5750  
 CASING SIZE 5 7/8 DEPTH 5233  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX 1250 MINIMUM 750  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT 42'  
 CEMENT LEFT IN CSG. 42'  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT H2O 126.66

OWNER same  
 CEMENT  
 AMOUNT ORDERED 50 bags 60140 41 gal  
125 bags ASC 5# Kolmed .57-F1160  
1/2# Rls seal

COMMON	30	@ 17.90	537.00
POZMIX	20	@ 9.35	187.00
GEL	1	@ 23.40	23.40
CHLORIDE		@	
ASC 125		@ 20.90	2062.50
Kols seal	625	@ .98	612.50
FLODENT	25	@ 2.98	74.25
F1-160	58	@ 18.90	1096.20
DF	17	@ 9.80	166.60
		@	
		@	
		@	
HANDLING	216.14	@ 2.48	536.02
MILEAGE	9.3 x 28 x	2.60	677.04
			TOTAL <u>6522.51</u>

EQUIPMENT  
 PUMP TRUCK CEMENTER Charles Kingon  
 # 597 HELPER Jim dickson  
 BULK TRUCK  
 # 603 DRIVER Josh ellis  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

**REMARKS:**

Rig Ran 5233' cas Break circulation  
2 1/2 Rig Mud drop Bulk pump through  
6800 psi Hook to head 5881 H2O  
ahead shut down plug Rat hole  
2 1/2 3000 mouse hole 2 1/2 2000 Hook  
to head MIN 125 stage shut down  
exp pump + line Hook back to head  
displace 126 BBI plug did band  
float did hold Bump plug to  
1250

CHARGE TO: lotus operating  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**SERVICE**

DEPTH OF JOB	<u>5233</u>		
PUMP TRUCK CHARGE	<u>3,149.78</u>		
EXTRA FOOTAGE		@	
MILEAGE Hvm	28	@ 7.70	215.60
MANIFOLD		@ 275.00	275.00
	Lvm 28	@ 4.40	123.20
		@	
			TOTAL <u>3763.58</u>

**PLUG & FLOAT EQUIPMENT**

<u>5 1/2 Rubber plug</u>	<u>85.00</u>	<u>85.00</u>
<u>1-Reg guide shoe</u>	<u>@</u>	<u>281.00</u>
<u>1-#Flt direct</u>	<u>@ 366.00</u>	<u>366.00</u>
<u>5 1/2 center tubes</u>	<u>@ 57.00</u>	<u>285.00</u>
<u>1-Basket</u>	<u>@ 395.00</u>	<u>395.00</u>
	@	
		TOTAL <u>1411.00</u>

Thank you!

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 X Robin  
 SIGNATURE X Robin

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 11,697.07  
 DISCOUNT 2,057.21  
9,639.86 IF PAID IN 30 DAYS

