



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1207982  
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: \_\_\_\_\_

1207982

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)*

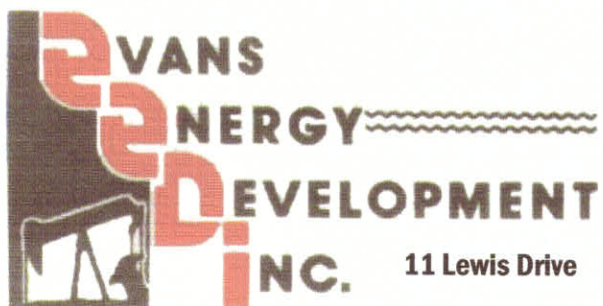
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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> <input type="checkbox"/> Other <i>(Specify)</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**

Verde Oil Company

E. Davidson #18

API #15-207-28,792

December 26 - December 27, 2013

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
8	soil & clay	8
12	sand & clay	20
101	shale	121
34	lime	155
2	shale	157
24	lime	181
14	shale	195
126	lime	321
9	shale	330
3	lime	333
2	shale	335
24	lime	359
4	shale	363
43	lime	406
22	shale	428
3	lime	431
36	shale	467
60	lime	527
5	shale	532
58	lime	590 base of the Kansas City
28	shale	618
13	broken sand	631 20% green sand 80% shale no odor
116	shale	747
3	lime	750
11	shale	761
9	lime	770
4	shale	774
10	lime	784
7	shale	791
9	sand	800 hard green sand no show
45	shale	845
5	lime	850
3	shale	853
16	lime	869
6	shale	875
5	lime	880
17	shale	897
22	lime	919
1	shale	920
8	lime	928

1	silty shale	929
1	oil sand	930 brown sand ok bleeding
3	broken sand	933 15% brown sand 15% lime 70% shale light bleeding
4	oil sand	937 brown sand ok bleeding
4	broken sand	941 40% brown sand 60% shale light bleeding
1	broken sand	942 70% brown sand 30% shale good bleeding
1	oil sand	943 brown sand good bleeding
3	silty shale	946
27	shale	973
1	lime & shells	974
2	silty shale	976
2	lime & shells	978
2	broken sand	980 dark brown & black sand light bleeding
13	black sand	993 minimal show light oil odor
5	grey sand	998 no show or odor
11	silty shale	1009
46	shale	1055 TD

Drilled a 9 7/8" hole to 43.8'

Drilled a 5 5/8" hole to 1055'

Set 43.8' of 7" threaded and coupled surface casing, cemented with 10 sacks cement.

Set 1047' of 2 7/8" 8 round upset tubing with 4 centralizers, 1 float shoe, 1 clamp, 1 seating nipple, 1 baffle





2650204

TICKET NUMBER 45793  
 LOCATION Eureka, KS  
 FOREMAN David Gardner

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

API # 15-207-28792

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-29-13	8520	Earl Davidson # 18	6	19E	29	Woodson
CUSTOMER						
Verde Oil Co.						
MAILING ADDRESS						
3345 Arizona Rd.						
CITY		STATE	ZIP CODE			
Savonburg		KS	66722			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			445	Chris B.		
			611	Zevi A.		
			637	Colby N.		

JOB TYPE \_\_\_\_\_ HOLE SIZE \_\_\_\_\_ HOLE DEPTH 1055' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH 1047' DRILL PIPE \_\_\_\_\_ TUBING 2 7/8" OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL 38 Bbl WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 6 Bbl DISPLACEMENT PSI 600 <sup>Bump</sup> ~~Mix~~ PSI Plug - 1000 PSI RATE 1 BPM

REMARKS: Safety Meeting. Rig up to 2 7/8" Tubing. Break circulation w/ 9 Bbl. Mixed 200# Gel-Flush. 5 Bbl water spacer. Mixed 160 sks 50/50 Pozmix Cement w/ 5# Kol-seal/sk, 2% Gel, 5% Salt, + 1/4" Phenoseal/sk. Shut down. Washout pump & lines. Load 2 7/8" Latchdown plug. (Provided by customer). Displace w/ 6 Bbl Fresh water. Final pumping pressure of 600 PSI. Bump plug to 1000 PSI. Release pressure. Plug Held. Shut well in w/ 0 PSI. Good circulation @ all times. 7 Bbl cement slurry to pit. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00 ✓
5406	35	MILEAGE	4.20	147.00 ✓
1124	160 SKS	50/50 Pozmix Cement	11.50	1840.00 ✓
1110A	800 #	Kol-seal @ 5#/sk	.46	368.00 ✓
1118B	300 #	Gel @ 2%	.22	66.00 ✓
1111	400 #	Salt @ 5%	.39	156.00 ✓
1107A	40 #	Phenoseal @ 1/4#/sk	1.35	54.00 ✓
5407	6.72 Tons	Ton Mileage Bulk Truck	M/C	368.00 ✓
5502C	3 Hes.	80 Bbl Vac Truck	90.00	270.00 ✓
1123	3000 Gal.	City Water	17.30/1000	51.90 ✓
1118B	200 #	Gel-Flush	.22	44.00 ✓
			Subtotal	4449.90 ✓
			SALES TAX	184.46 ✓
			ESTIMATED TOTAL	4634.36 ✓
"Thank You"			7.15%	

**completed**

Ravin 3737  
 AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's