



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1204520
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: _____

1204520

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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Form	ACO1 - Well Completion
Operator	Raney Oil Company, LLC
Well Name	Rogers 4
Doc ID	1204520

Tops

Name	Top	Datum
ANH	1661	+574
BANH	1710	+525
TOP	3263	-1028
Heeb	3471	-1236
LKC	3510	-1275
Cong	3750	-1515
ARB	3791	-1556
RTD	3803	-1568



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Raney Oil Company, LLC

23-10s-20w Rooks,KS

4685 Bauer Brook Ct.
Lawrence, KS 66049

Rogers #4

Job Ticket: 58754

DST#: 1

ATTN: Duane Stecklein

Test Start: 2014.04.09 @ 02:40:34

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 06:46:04

Time Test Ended: 11:46:04

Test Type: Conventional Bottom Hole (Initial)

Tester: Brannan L

Unit No: 48

Interval: 3788.00 ft (KB) To 3803.00 ft (KB) (TVD)

Reference Elevations: 2232.00 ft (KB)

Total Depth: 3803.00 ft (KB) (TVD)

2225.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 7.00 ft

Serial #: 8372

Inside

Press@RunDepth: 322.27 psig @ 3804.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.04.09

End Date:

2014.04.09

Last Calib.: 2014.04.09

Start Time: 02:40:35

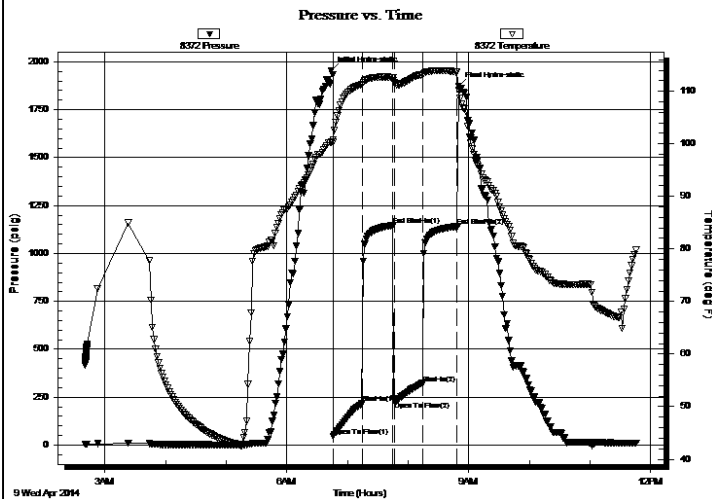
End Time:

11:46:04

Time On Btm: 2014.04.09 @ 06:44:04

Time Off Btm: 2014.04.09 @ 08:50:04

TEST COMMENT: 30- IF- BOB 6 mins
30- IS- Weak surface blow
30- FF- BOB 8 mins
30- FS- Weak surface blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1954.91	100.31	Initial Hydro-static
2	46.40	100.75	Open To Flow (1)
31	216.75	111.33	Shut-In(1)
61	1145.96	112.57	End Shut-In(1)
63	227.03	111.67	Open To Flow (2)
90	322.27	113.04	Shut-In(2)
124	1140.05	113.62	End Shut-In(2)
126	1872.56	110.27	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
850.00	GO, 10%G 90%O	8.67
0.00	100' GIP	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

GLOBAL CEMENTING, L.L.C.

1287

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE <u>4-2-14</u>	SEC. <u>29</u>	TWP. <u>10</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION	JOB START <u>7:45pm</u>	JOB FINISH <u>10:15pm</u>
LEASE <u>Rogers</u>	WELL #. <u>4</u>	LOCATION			COUNTY <u>Rooks</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (CIRCLE ONE)							

CONTRACTOR Sheilds

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D.

CASING SIZE 8 5/8 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 20st

PERFS

DISPLACEMENT 12 1/2 bbl

EQUIPMENT

PUMP TRUCK CEMENTER Heath

P1 HELPER Cody

BULK TRUCK

B3 DRIVER Eric

BULK TRUCK

DRIVER

REMARKS:

Ran 5 hrs of 8 5/8 casing and landing it

Est Circulation with mud pump

Hook up and mix 150sy cement and d.sp 12 1/2 bbl

of H2O - Shut in @ psi

Cement + D.O. Circulate to surface.

CHARGE TO: Raney Oil Co

STREET _____

CITY _____ STATE _____ ZIP _____

Global Cementing, L.L.C.,
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 George Begler

SIGNATURE George Begler

OWNER _____

CEMENT AMOUNT ORDERED 150sy com 3% O.C.C

2% gel

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE 34x2 _____ @ _____

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

JOB LOG

SWIFT Services, Inc.

DATE 8 APR 14 PAGE 1

CUSTOMER *Camden - West of* WELL NO. *#4* LEASE *Parsons* JOB TYPE *Completion string 2 stage* TICKET NO. *26131*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								200 sk SMDW / 4# floccle
								150 sk SA-2 w/ 4# floccle sheet 22.54'
								5 1/2" x 15.5" casing 3374.29 packer shoe
								DV tool 1650' @ 53 Basket 2, 52
								Conductions 1, 3, 5, 7, 9, 11, 55, 58
	1830							run to TRL 114
	1910							start 5 1/2" x 15.5" casing in well
	2130							circulate well
	2200							Drop golden ball
						1000		open DV to set packer shoe
	2208	4	12			200		run 500 gal mud flush
		4	20			200		run 20 bbl KCL flush
	2213	4	35			200		mix SA-2 cement 150 sk @ 15.6 ppm
								Drop 1st stage plug
								wait out one 1/2 hr.
	2225	6 1/2				200		Displace plug
		6 1/2	80			750		
	2240	6 1/2	89			150		Land plug
								Release pressure to truck - dried up
	2245							Drop bomb
	2256		3			1000		open DV tool - run flush KCL
								mix SMD cement @ 11.2 ppm
	2300		7					Plug P.H. - MH 30 sk @ 11.2 ppm
	2307	6	110			200		mix SMD cement 150 sk @ 11.2 ppm
								Drop 2nd stage plug
	2321	6				200		Displace plug
		6	37			650		cement to surface
	2330	6	39			150		Land plug - close DV tool
								Release pressure to truck - dried up
	2345							wait tank
								pack up
	0000							job complete

Thinks
DAN, Blaine & / good