



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1208146  
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: \_\_\_\_\_

1208146

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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Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	KISNER D 1
Doc ID	1208146

All Electric Logs Run

DUAL SPACED NEUTRON SPECTRAL DENSITY LOG
MICROLOG
BOREHOLE COMPENSATED SONIC ARRAY LOG
ARRAY COMPENSATED TRUE RESISTIVITY LOG

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	KISNER D 1
Doc ID	1208146

Tops

Name	Top	Datum
HEEBNER	3999	
TORONTO	4017	
LANSING	4088	
KANSAS CITY	4468	
MARMATON	4621	
PAWNEE	4705	
CHEROKEE	4753	
ATOKA	5028	
MORROW	5087	
CHESTER	5104	
ST GENEVIEVE	5120	



# ALLIED OIL & GAS SERVICES, LLC 052545

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Liberal KS

DATE <u>4-12-14</u>	SEC <u>35</u>	TWP. <u>26S</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION <u>11:30 am</u>	JOB START <u>2:00 pm</u>	JOB FINISH <u>3:00 pm</u>
LEASE <u>Kisner</u>	WELL # <u>D-1</u>	LOCATION			COUNTY <u>Finney</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Aztec #507  
 TYPE OF JOB Surface  
 HOLE SIZE 12 1/4 T.D. 1642  
 CASING SIZE 8 5/8 DEPTH 1642  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT 40 65  
 CEMENT LEFT IN CSG.  
 PERFS.  
 DISPLACEMENT 102661  
 EQUIPMENT

OWNER

CEMENT  
 AMOUNT ORDERED 350st Class C 2% Exposed  
2% Sodium Metasilicate 2% cc 1/4" # Flo Seal 1.2% SASI  
245st Class C 3% cc 1/4" # Flo Seal  
 COMMON Class C 245st @ 24.40 \$978.00  
 POZMIX @  
 GEL @  
 CHLORIDE 22st @ 64.00 1408.00  
 ASC @  
Allied Multi-Density (C) 350st @ 31.00 10850.00  
 @  
 @  
JFS/ (db # @ 17.55 1158.30  
Flo Seal 150# @ 2.97 495.50  
 @  
 @  
 @  
 HANDLING 665.87 @ 2.48 1651.36  
 MILEAGE 1478.46 @ 2.60 3844.00  
 TOTAL 25,335.16

REMARKS:

AP LOCATION/DEPT Liberal D02  NON D02   
 LEASE/WELL/FACTORY Kisner D-1  
 TAXID / WSN #  
 TASK 0102 ELEMENT 3023  
 PROJECT # 1178943 CAPEX / OPEX - Circle one  
 BPO / BPA UNSUPPORTED   
 PRINTED NAME James Carter  
 SIGNATURE: James Carter

SERVICE  
 DEPTH OF JOB 1001-2000  
 PUMP TRUCK CHARGE 2213.75  
 EXTRA FOOTAGE @  
 MILEAGE 50 @ 7.70 385.00  
 MANIFOLD 1 @ 275.00  
Light Vehicle 50 @ 4.40 220.00  
 @  
 TOTAL 3093.75

CHARGE TO: Oxy USA  
 STREET  
 CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

Plug 8 5/8 1 @ 131.00  
AFE Insert Float 1 @ 447.00  
Guide shoe 1 @ 460.00  
Centralizers 14 @ 75.00 1050.00  
Stop collars 1 @ 56.00  
 @  
 TOTAL 2144.00

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 James Carter  
 SIGNATURE James Carter

SALES TAX (If Any)  
 TOTAL CHARGES \$ 30,572.91  
 DISCOUNT 9472.60 / 31 % IF PAID IN 30 DAYS  
 Net \$ 21,095.31

# ALLIED OIL & GAS SERVICES, LLC 052547

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Libcap/KS

DATE <u>4-15-14</u>	SEC <u>35</u>	TWP. <u>26S</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION <u>6:30pm</u>	JOB START <u>8:00pm</u>	JOB FINISH <u>9:30pm</u>
LEASE <u>Kisner</u>	WELL # <u>D-1</u>	LOCATION <u>Vec. Gardencity KS</u>			COUNTY <u>Finney</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Aztec #507  
 TYPE OF JOB Production  
 HOLE SIZE 7 1/8 T.D. 5312  
 CASING SIZE 5 1/2 in DEPTH 5316  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX 4000 psi MINIMUM  
 MEAS. LINE SHOE JOINT 41.03  
 CEMENT LEFT IN CSG. .666/  
 PERFS.  
 DISPLACEMENT 122.260/

OWNER  
 CEMENT  
 AMOUNT ORDERED 2000 (H) 200 gal  
50/50  
S20 Gyp seal 100 salt 5% Gilsomite  
1 1/4 # flo seal 1.50 50/50 2% CD-31  
 COMMON @  
 POZMIX @  
 GEL @  
 CHLORIDE @  
 ASC @  
 Allied 50/50 (H) 2000 @ 16.05 4718.00  
 Salt 17.10 SK @ 26.55 450.59  
 Gyp seal 23.58 @ 37.60 885.00  
 Gilsomite 1400 # @ 1.98 1312.00  
 Flo seal 10 # @ 2.97 29.70  
 FL-160 11.16 # @ 18.90 210.64  
 CD-31 4 # @ 10.90 43.60  
 Super Flush 1266 @ 58.70 74140  
 HANDLING 376 @ 2.48 932.48  
 MILEAGE 712.60 @ 2.60 1852.76  
 TOTAL 13828.47

EQUIPMENT  
 PUMP TRUCK CEMENTER Lenny Saepa  
 # S49-550 HELPER Jaime Maldonado  
 BULK TRUCK  
 # B68-042 DRIVER Ricardo Landa  
 BULK TRUCK  
 # DRIVER

REMARKS:

AP LOCATION/DEPT. Libcap D02  NON D02   
 LEASE/WELL/FAC. Kisner D-1  
 MAXIMO / WSM #  
 TASK 01-02 ELEMENT 3023  
 PROJECT # 1178743 CAPEX / OPEX - Circle one  
 SPO / BPA  UNSUPPORTED   
 PRINTED NAME JARED LEWTON  
 SIGNATURE: Jared Lewton  
I certify that these Services/Materials have been received

CHARGE TO: Oxy USA  
 STREET  
 CITY STATE ZIP

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 JARED LEWTON  
 SIGNATURE Jared Lewton

SERVICE  
 DEPTH OF JOB 5001-6000  
 PUMP TRUCK CHARGE 3092.25  
 EXTRA FOOTAGE @  
 MILEAGE 80 @ 7.70 616.00  
 MANIFOLD 1 @  
1-light vehicle 80 @ 4.40 352.00  
 TOTAL 3979.25

PLUG & FLOAT EQUIPMENT  
 Top Rubber plug 1 @ 65.41  
 Steel collar 1 @ 49.14  
 Guide shoe 1 @ 280.00  
 AFU Float Insert 1 @ 334.62  
 Centralizer 20 @ 57.33 1146.60  
 TOTAL 1896.57

SALES TAX (If Any)  
 TOTAL CHARGES \$ 19,704.29  
 DISCOUNT IF PAID IN 30 DAYS  
Net \$ 13,793.00