

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1209134

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

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: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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>	☐ Yes	☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes	☐ No	Name	Top	Datum
Cores Taken	☐ Yes	☐ No			
Electric Log Run	☐ Yes	☐ No			
List All E. Logs Run:					

CASING RECORD ☐ New ☐ 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
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ 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 (Amount and Kind of Material Used)		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: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> ☐ Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 041590

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell KS

DATE <u>5-15-10</u>	SEC. <u>35</u>	TWP. <u>10</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION	JOB START <u>12:15pm</u>	JOB FINISH <u>12:45pm</u>
LEASE <u>Keller/Teel</u>	WELL # <u>1</u>		LOCATION <u>Ellis North to County line</u>		COUNTY <u>Rooks</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1.3 East 3/10 North East into.</u>				

CONTRACTOR Murfin Drilling #16

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 235'

CASING SIZE 8 5/8 DEPTH 234.64'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 14 Bbl

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts

417 HELPER Matt

BULK TRUCK

410 DRIVER Heath

BULK TRUCK

DRIVER

REMARKS:

Est. Circulation

Mix 160sk Cement

Displace w/ 14 Bbl H₂O

Cement Did Circulate!

Thank You!

CHARGE TO: Blake Exploration

STREET

CITY STATE ZIP

OWNER

CEMENT 150

AMOUNT ORDERED ~~150~~ 6940 3 1/2 CC 2% Gel

COMMON	<u>90</u>	@	<u>13.50</u>	<u>1215.00</u>
POZMIX	<u>60</u>	@	<u>7.55</u>	<u>453.00</u>
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>5</u>	@	<u>51.50</u>	<u>257.50</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>25</u>	@	<u>7.25</u>	<u>168.75</u>
MILEAGE	<u>110/sk/47c</u>			<u>300.00</u>

TOTAL 2455.00

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>991.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>45</u>	@	<u>71.00</u>
MANIFOLD		@	
		@	
		@	

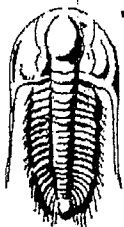
TOTAL 1306.00

PLUG & FLOAT EQUIPMENT

	@	
	@	
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To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and help(er)s to assist owner or



TRILOBITE
TESTING, INC

DRILL STEM TEST REPORT

Blake Exp

Keller-Teall #1

201 S. Main
Po Box 150
Bogue, Ks 67625
ATTN: Mike Davignon

35-10s-20w/Rooks

Job Ticket: 38460

DST#: 2

Test Start: 2010.05.19 @ 03:48:37

GENERAL INFORMATION:

Formation: LKC "F"

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 05:18:32

Time Test Ended: 09:33:01

Test Type: Conventional Bottom Hole

Tester: Brian Fairbank

Unit No: 41

Interval: 3515.00 ft (KB) To 3540.00 ft (KB) (TVD)

Total Depth: 3540.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition:

Reference Elevations: 2169.00 ft (KB)

2164.00 ft (CF)

KB to GR/CF: 5.00 ft

Serial #: 8647

Inside

Press@RunDepth: 54.22 psig @ 3521.00 ft (KB)

Start Date: 2010.05.19

End Date:

2010.05.19

Capacity: 8000.00 psig

Last Calib.: 2010.05.19

Start Time: 03:48:37

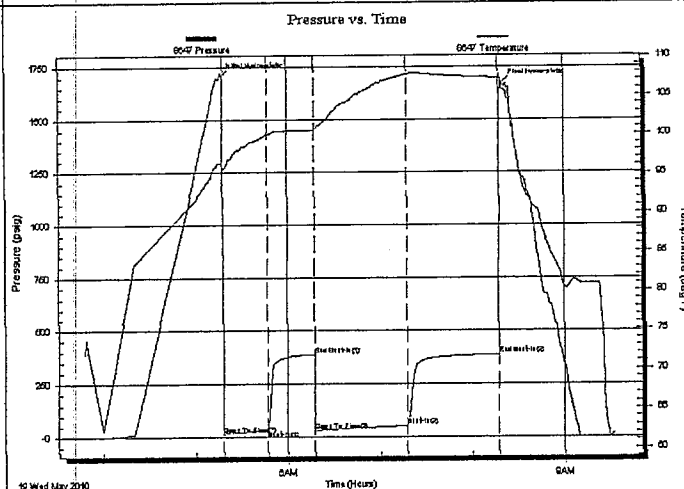
End Time:

09:33:01

Time On Btm: 2010.05.19 @ 05:17:32

Time Off Btm: 2010.05.19 @ 08:19:31

TEST COMMENT: IFP - weak blow throughout 1/4" - 3"
ISI - no blow back
FFP - weak to fair blow sur - 4"
FSI - no blow back



PRESSURE SUMMARY

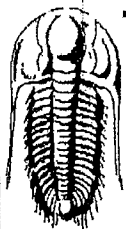
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1707.42	96.12	Initial Hydro-static
1	15.10	95.02	Open To Flow (1)
30	32.28	99.87	Shut-In(1)
60	387.28	100.57	End Shut-In(1)
61	32.88	100.51	Open To Flow (2)
120	54.22	107.64	Shut-In(2)
180	385.95	107.17	End Shut-In(2)
182	1669.54	105.76	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	MUD 100%	0.02
79.00	MW 80%W, 20%M	0.88
1.00	OIL TSTM	0.01

Gas Rates

	Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)
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TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Blake Exp

Keller-Teall #1

201 S. Main
Po Box 150
Bogue, Ks 67625
ATTN: Mike Davignon

35-10s-20w/Rooks

Job Ticket: 38459

DST#: 1

Test Start: 2010.05.18 @ 16:42:33

GENERAL INFORMATION:

Formation: LKC "C"

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 18:40:58

Time Test Ended: 21:19:57

Test Type: Conventional Bottom Hole

Tester: Brian Fairbank

Unit No: 41

Interval: 3477.00 ft (KB) To 3499.00 ft (KB) (TVD)

Total Depth: 3499.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition:

Reference Elevations: 2169.00 ft (KB)

2164.00 ft (CF)

KB to GR/CF: 5.00 ft

Serial #: 8647

Inside

Press@RunDepth: 13.80 psig @ 3481.00 ft (KB)

Start Date: 2010.05.18

End Date:

2010.05.18

Start Time: 16:42:33

End Time:

21:19:57

Capacity: 8000.00 psig

Last Calib.: 2010.05.18

Time On Btm: 2010.05.18 @ 18:39:58

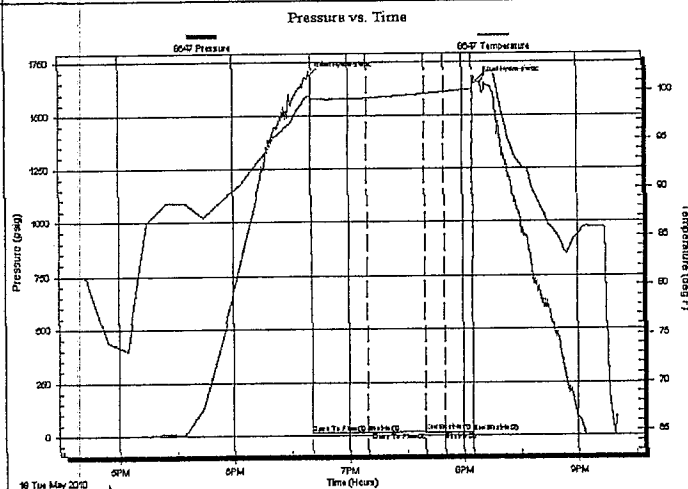
Time Off Btm: 2010.05.18 @ 20:07:28

TEST COMMENT: IFP - strong sur blow - died 12 min.

ISI - no blow back

FFP - no blow

FSI - no blow back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1686.86	99.49	Initial Hydro-static
1	14.24	99.07	Open To Flow (1)
30	14.08	99.30	Shut-In(1)
60	17.38	99.72	End Shut-In(1)
61	13.86	99.73	Open To Flow (2)
70	13.80	99.89	Shut-In(2)
85	14.74	100.17	End Shut-In(2)
88	1659.57	100.85	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1.00	OCM 10%O, 90%M	0.00

Gas Rates

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