



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1209252  
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: \_\_\_\_\_

1209252

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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COMPANY: Barnard Oil Operations  
ADDRESS: Madison, KS

LEASE: McClelland  
COUNTY: Greenwood  
LOCATION 990' fnl/2640'  
Sec 14, Twshp 22, Rng 11e

COMMENCED:  
COMPLETED:  
WELL #:  
API#:  
STATUS:  
TOTAL DEPTH:  
CASING:

7/6/2010  
7/10/2010  
B-5  
15-073-24142  
Oil Well  
1980'-6 3/4"  
40'-8 5/8" cmt w/ 20 sx  
1996'- 4 1/2"  
Consol. Cmt

DRILLER'S LOG

5	SOIL AND CLAY	1311	1301 Ls
10	Ls	1399	LS (sa)
29	Shale (SH)	1510	LS
40	Limestone (LS)	1539	Sh
48	SH	1549	Coal (CO)
62	LS	1626	LS
194	SH w/LS Brks	1630	SH
213	LS	1632	Ls
284	SH	1661	Sh BLK
325	LS	1663	LS w/SH Brks
380	SH w/LS Brks	1684	Co
433	LS w/SH Brks	1684	Sh
448	SH	1694	Ls
482	LS	1855	Sh w/ Ls strks
702	Sh w/ Ls strks	1860	Sh w/ sa Lt Odor
706	Sh (blk)	1880	Sh
826	Sh w/ Ls brks	1937	Sa (good odor)
922	Sa	1980	Sh T.D.
951	SH		
1094	LS w/ sh brks		
1222	Sh		
1234	LS		
1240	Sh Blk		
1252	LS w/SH Brks		
1260	Sh		
1268	Ls		
1281	Sh		

\* Rig 6 drilling crew set + cemented  
40' of 8 5/8" surface pipe themselves.

RKB

KCC WICHITA

JUN 12 2014

RECEIVED



**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 28902

LOCATION Eureka

FOREMAN Steve Mead

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

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-11-10	1642	McClelland B-5	14	225	11E	Greenwood
CUSTOMER Barnard Oil Operations			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 535			485	Alan		
CITY Madison			479	J.P.		
STATE KS			515	Chris		
ZIP CODE 66860			442/763	Jim		

JOB TYPE Longstring 0 HOLE SIZE 6 3/4 HOLE DEPTH 1950' CASING SIZE & WEIGHT 4 1/2  
 CASING DEPTH 1996' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.2-13.6 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 32 bbls DISPLACEMENT PSI 600<sup>s</sup> MIX PSI Bump Plug 1000<sup>s</sup> RATE \_\_\_\_\_

REMARKS: Softy Meeting! Rig up to 4 1/2 casing. Break Circulation w/ 10 bbls Fresh water Mix 170 sks 60/40 Poz mix Cement w/ 6% Gel + 1/2" Pheno seal AT 12.2" per/sk. Tail in with 60 sks Thick set Cement w/ 5" Kol-Seal AT 13.4" per/sk. Wash out pump & lines. Release Plug. Displace w/ 32 bbls Fresh water. Final pumping Pressure 600<sup>s</sup>. Bump Plug 1000<sup>s</sup> Wait 2min Release pressure Plug held. Shut casing in 0. Good Cement Returns to surface. 20 bbls Slurry to Pit. Job Complete Rig down.

*Thank you*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	900.00	900.00
5406	30	MILEAGE	3.55	106.50
1131	170 sks	60/40 Poz Mix Cement	11.35	1929.50
1118A	850 <sup>s</sup>	Gel 6%	.20	176.00
1107A	43 <sup>s</sup>	Pheno Seal 1/2" per/sk	1.15	49.45
1126A	60 sks	Thick set Cement	17.00	1020.00
1110A	300 <sup>s</sup>	Kol-Seal 5" per/sk	.42	126.00
5407A	10.6 Tons	Tan Mileage Bulk Trucks	1.20	381.60
5501C	4 hrs	Water Transport	108.00	432.00
1123	5500 gallons	CITY Water	14.90 <sup>per 1000</sup>	81.95
4404	1	4 1/2 Top Rubber Plug	45.00	45.00
KCC WICHITA				
			Sub Total	5248.00
			SALES TAX	250.24
			ESTIMATED TOTAL	5498.24

Ravin 3737

2351M

JUN 12 2014

RECEIVED

AUTHORIZATION Witness by Dick Barnard

TITLE owner

DATE 7-14-10

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.