



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1210134
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: _____

1210134

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No 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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
 Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 8884

Date	Sec.	Twp.	Range	County	State	On Location	Finish
2-27-13	8	15	16	Russell	KS		11:30 AM

Location *Russell, KS - road end 2E, 3S, 16R*

Lease <i>Block</i>	Well No. <i>AD</i>	Owner <i>Nor</i>
Contractor <i>Royal #1</i>	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Type Job <i>Surface</i>	Charge To <i>Wood Group</i>	
Hole Size <i>11 7/8</i>	T.D. <i>194</i>	Street
Csg. <i>256</i>	Depth <i>194</i>	City
Tbg. Size	Depth	State
Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
Cement Left in Csg.	Shoe Joint <i>5</i>	Cement Amount Ordered <i>180 csg 2856 2751</i>
Meas Line	Displace <i>23011</i>	

EQUIPMENT

Pumptrk <i>17</i>	No.	Cementer	Common
		Helper	<i>180</i>
Bulktrk <i>14</i>	No.	Driver	Poz. Mix
		Driver	Gel. <i>3</i>
Bulktrk <i>14</i>	No.	Driver	Calcium
		Driver	<i>6</i>

JOB SERVICES & REMARKS

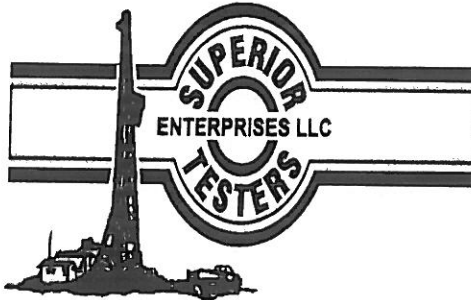
Remarks: <i>Cemented casing</i>	Hulls
Rat Hole	Salt
Mouse Hole	Flowseal
Centralizers	Kol-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38
	Sand
	Handling <i>189</i>
	Mileage

FLOAT EQUIPMENT

	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down

	Pumptrk Charge <i>Surface</i>	Tax
	Mileage <i>19</i>	Discount
		Total Charge

X Signature



DRILL STEM TEST REPORT

Prepared For: **Craig Oil Company**

15 South Main
Russell Ks, 67665-2901

ATTN: Jeff Lawler

Brack A-B #1

8/15s/12w/Russell

Start Date: 2013.09.03 @ 16:15:00

End Date: 2013.09.03 @ 23:41:00

Job Ticket #: 18491 DST #: 1

KCC WICHITA

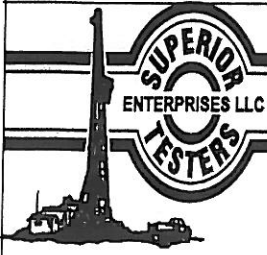
APR 18 2014

RECEIVED

Superior Testers Enterprises LLC
PO Box 138 Great Bend KS 67530
1-800-792-6902

Printed: 2013.09.03 @ 00:06:34

Craig Oil Company
8/15s/12w/Russell
Brack A-B #1
DST # 1
LKC "A-D"
2013.09.03



DRILL STEM TEST REPORT

TOOL DIAGRAM

Craig Oil Company
 15 South Main
 Russell Ks, 67665-2901
 ATTN: Jeff Lawler

8/15a/12w/Russell
 Brack A-B #1
 Job Ticket: 18491 DST#: 1
 Test Start: 2013.09.03 @ 16:15:00

Tool Information

Drill Pipe:	Length: 2981.00 ft	Diameter: 3.80 inches	Volume: 41.82 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 20000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 72000.00 lb
			<u>Total Volume: 41.82 bbl</u>	Tool Chased 1.00 ft
Drill Pipe Above KB:	28.00 ft			String Weight: Initial 55000.00 lb
Depth to Top Packer:	2974.00 ft			Final 55000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	60.25 ft			
Tool Length:	81.25 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description

Length (ft) Serial No. Position Depth (ft) Accum. Lengths

Change Over Sub	1.00			2954.00	
Shut-In Tool	5.00			2959.00	
Hydroic Tool	5.00			2964.00	
Packer	5.00			2969.00	21.00 Bottom Of Top Packer
Packer	5.00			2974.00	
Perforations	5.00			2979.00	
Change Over Sub	0.75			2979.75	
Drill Pipe	31.75			3011.50	
Change Over Sub	0.75			3012.25	
Perforations	17.00			3029.25	
Recorder	1.00	6657	Inside	3030.25	
Recorder	1.00	8405	Outside	3031.25	
Bullnose	3.00			3034.25	60.25 Bottom Packers & Anchor

Total Tool Length: 81.25

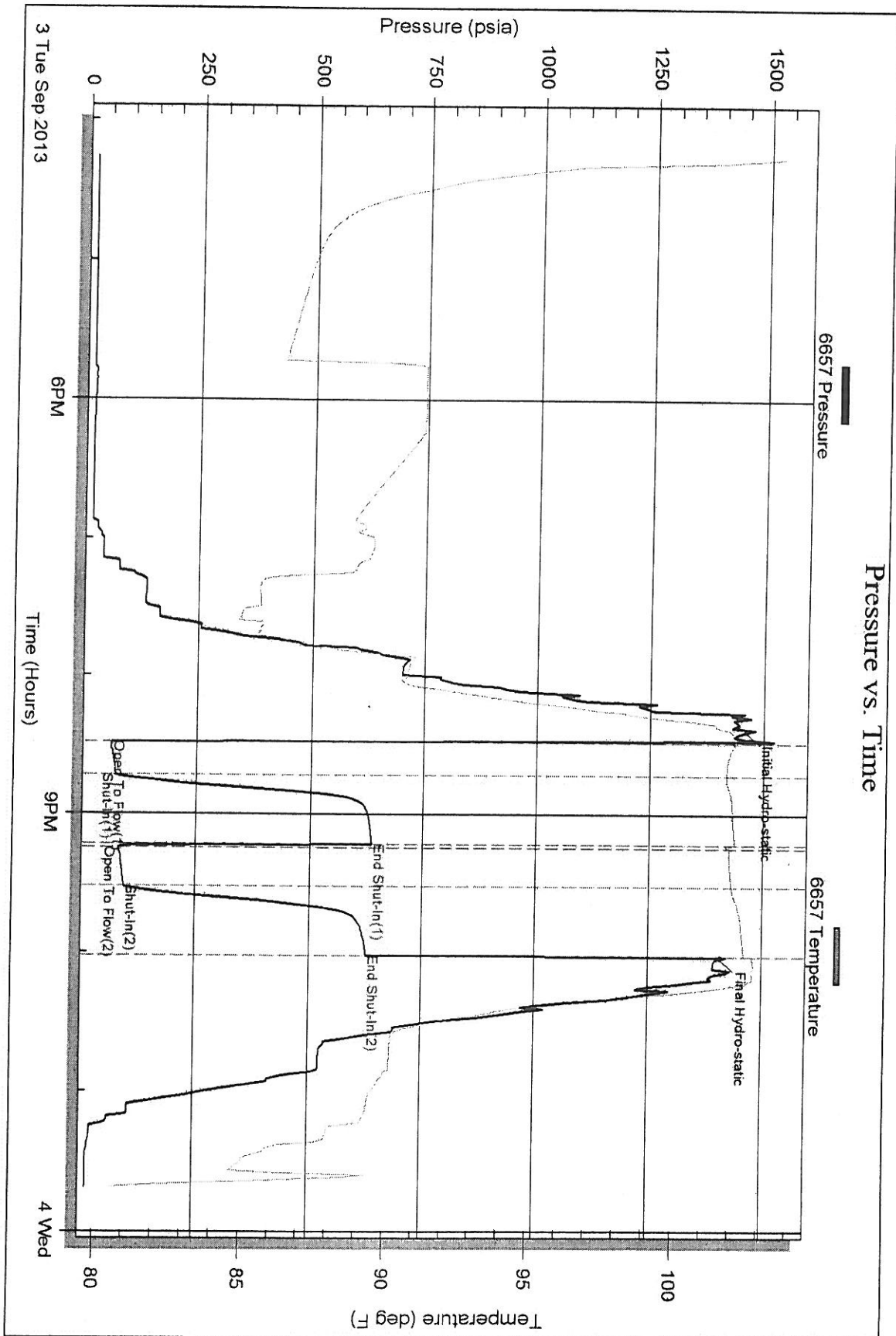
Serial #: 6657

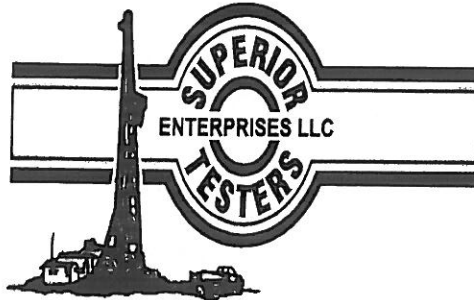
Inside

Craig Oil Company

Brack A-B #1

DST Test Number: 1





DRILL STEM TEST REPORT

Prepared For: **Craig Oil Company**

15 South Main
Russell Ks, 67665-2901

ATTN: Jeff Lawler

Brack A-B #1

8/15s/12w/Russell

Start Date: 2013.09.03 @ 12:45:00

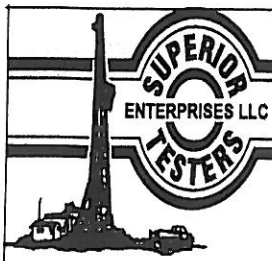
End Date: 2013.09.03 @ 18:37:30

Job Ticket #: 18492 DST #: 2

Superior Testers Enterprises LLC
PO Box 138 Great Bend KS 67530
1-800-792-6902

Printed: 2013.09.03 @ 18:59:52

Craig Oil Company 8/15s/12w/Russell Brack A-B #1 DST # 2 LKC "HJ" 2013.09.03



DRILL STEM TEST REPORT

Craig Oil Company
 15 South Main
 Russell Ks, 67665-2901
 ATTN: Jeff Lawler

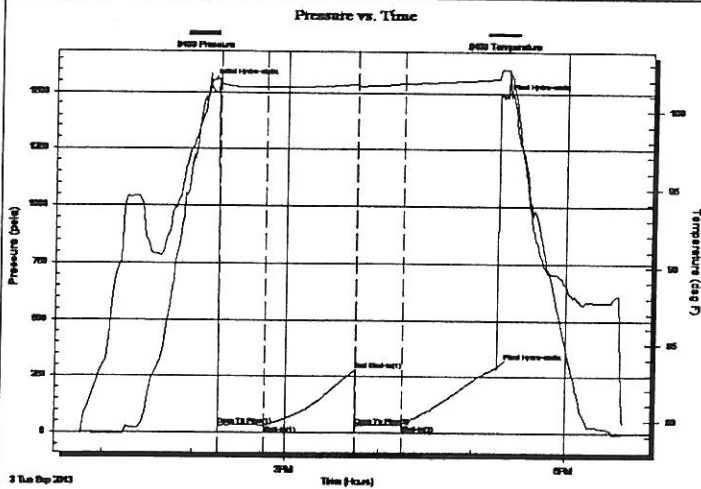
8/15s/12w/Russell
Brack A-B #1
 Job Ticket: 18492 **DST#: 2**
 Test Start: 2013.09.03 @ 12:45:00

GENERAL INFORMATION:

Formation: **LKC "H-I"**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 14:16:30
 Time Test Ended: 18:37:30
 Interval: **3134.00 ft (KB) To 3190.00 ft (KB) (TVD)**
 Total Depth: **3190.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Floor**
 Test Type: **Conventional Bottom Hole (Initial)**
 Tester: **Shane Konzem**
 Unit No: **3330/100/Great Bend**
 Reference Elevations: **1822.00 ft (KB)**
 1815.00 ft (CF)
 KB to GR/CF: **7.00 ft**

Serial #: 8400 Outside
 Press@RunDepth: **277.90 psia @ 3187.40 ft (KB)** Capacity: **5000.00 psia**
 Start Date: **2013.09.03** End Date: **2013.09.03** Last Calib.: **2013.09.03**
 Start Time: **12:45:00** End Time: **18:37:30** Time On Btm: **2013.09.03 @ 14:10:00**
 18:37:30 Time Off Btm: **2013.09.03 @ 17:16:00**

TEST COMMENT: 1st Open/ 30 Minutes. A weak blow built to 2 inches in a 5 gallon bucket.
 1st Shut In/ 60 Minutes. No blow back.
 2nd Open/ 30 Minutes. Fair blow built to 9 inches in 5 gallon bucket.
 2nd Shut In/ 60 Minutes. No blow back.



PRESSURE SUMMARY

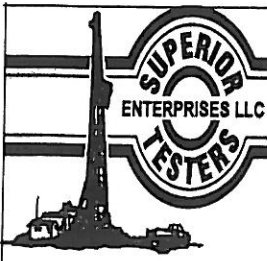
Time (Min.)	Pressure (psia)	Temp (deg F)	Annotation
0	1538.43	101.88	Initial Hydro-static
7	29.67	101.75	Open To Flow (1)
37	30.77	101.52	Shut-in(1)
95	277.90	101.73	End Shut-in(1)
96	30.30	101.63	Open To Flow (2)
125	34.85	101.76	Shut-in(2)
186	290.82	102.08	Final Hydro-static
190	1481.83	102.71	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	62 foot gas.	0.00
31.00	2.5% Oil, 97.5% mud.	0.43

Gas Rates

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



DRILL STEM TEST REPORT

FLUID SUMMARY

Craig Oil Company
15 South Main
Russell Ks, 67665-2901
ATTN: Jeff Lawler

8/15w/12w/Russell
Brack A-B #1
Job Ticket: 18492 **DST#: 2**
Test Start: 2013.09.03 @ 12:45:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 46.00 sec/qt	Cushion Volume: bbl		
Water Loss: 12.80 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psia		
Salinity: 8000.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	62 foot gas.	0.000
31.00	2.5% Oil, 97.5% mud.	0.435

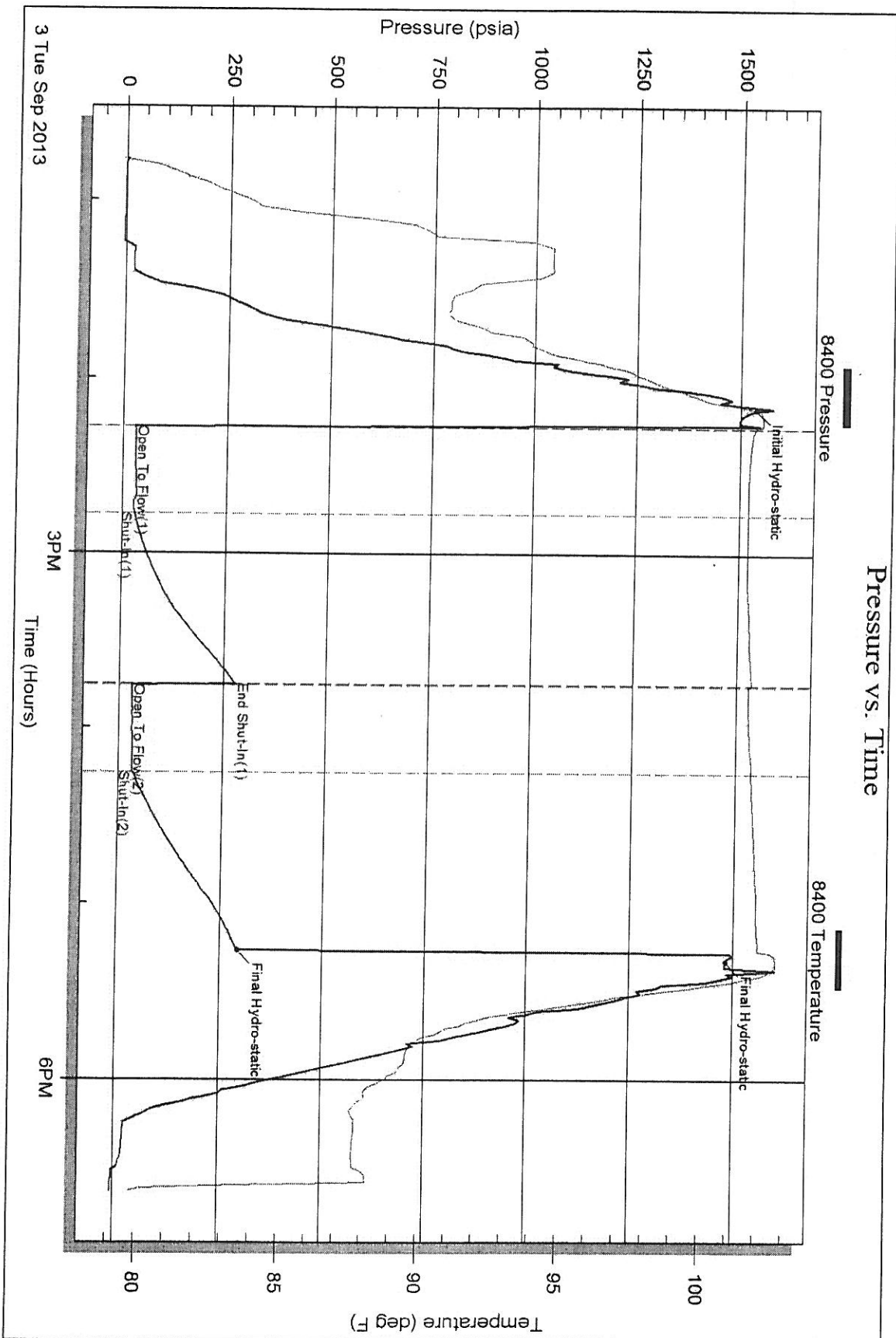
Total Length: 31.00 ft Total Volume: 0.435 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:

Serial #: 8400

Outside Craig Oil Company

Brack A-B #1

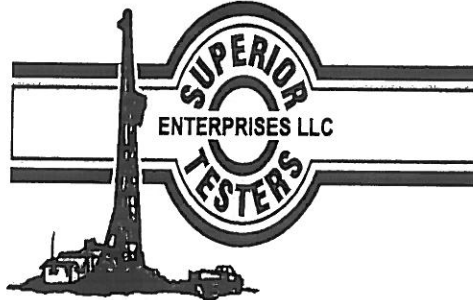
DST Test Number: 2



Superior Testers Enterprises LLC

Ref. No: 18492

Printed: 2013.09.03 @ 18:59:53



DRILL STEM TEST REPORT

Prepared For: **Craig Oil Company**

15 South Main
Russell Ks, 67665-2901

ATTN: Jeff Lawler

Brack A-B #1

8/15s/12w/Russell

Start Date: 2013.09.04 @ 16:15:00

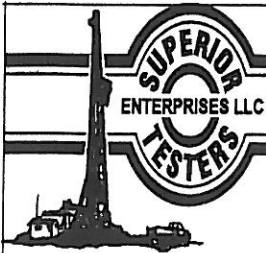
End Date: 2013.09.04 @ 22:17:00

Job Ticket #: 18493 DST #: 3

Superior Testers Enterprises LLC
PO Box 138 Great Bend KS 67530
1-800-792-6902

Printed: 2013.09.05 @ 00:12:53

Craig Oil Company 8/15s/12w/Russell Brack A-B #1 DST # 3 Toronto 2013.09.04



DRILL STEM TEST REPORT

FLUID SUMMARY

Craig Oil Company

8/15w/12w/Russell

15 South Main
Russell Ks, 67665-2901

Brack A-B #1

Job Ticket: 18493

DST#: 3

ATTN: Jeff Lawler

Test Start: 2013.09.04 @ 16:15:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 51.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.58 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psia

Salinity: 6800.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	NO gas.	0.000
20.00	100% Mud.	0.281

Total Length: 20.00 ft

Total Volume: 0.281 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

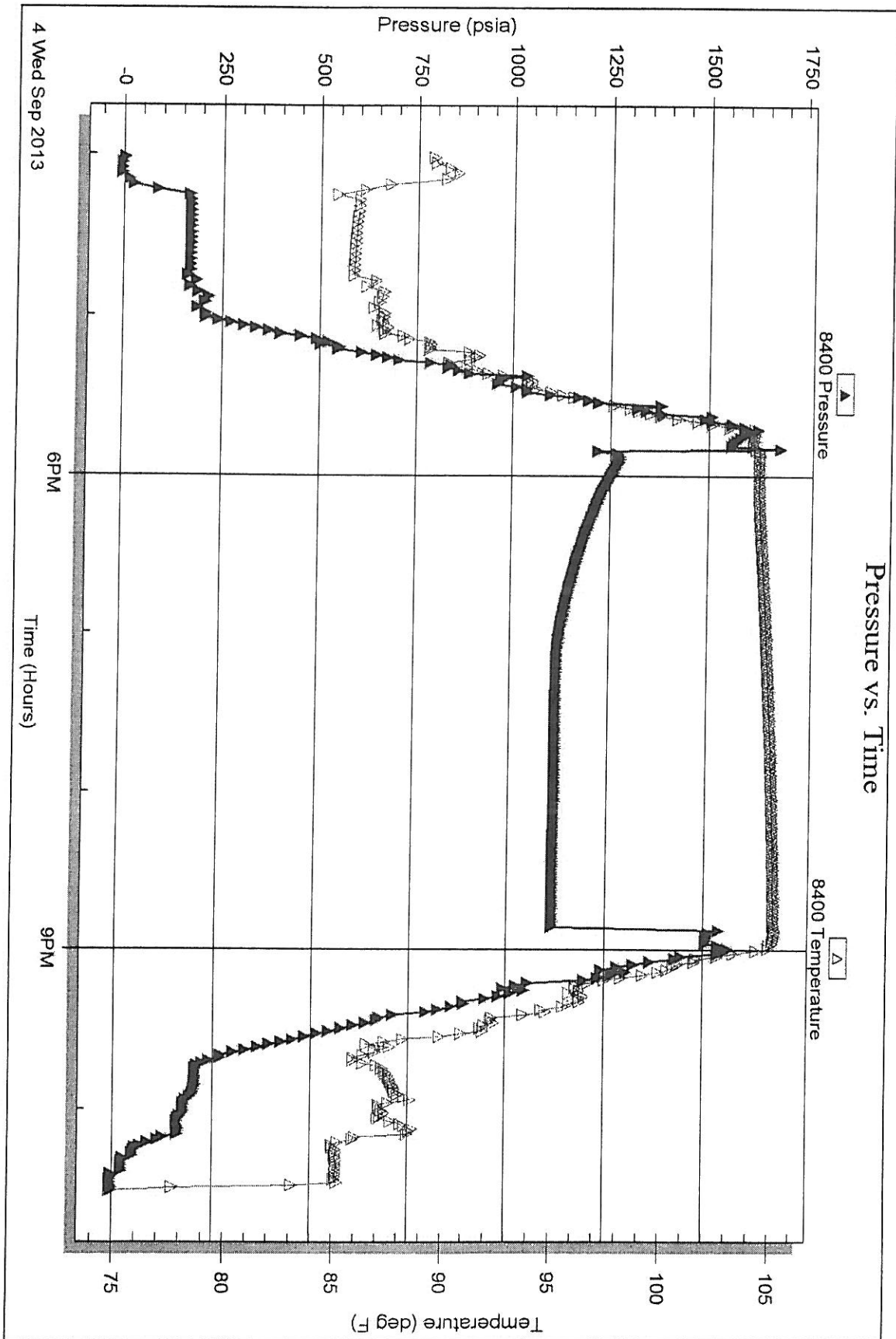
Recovery Comments:

Serial #: 8400

Craig Oil Company

Brack A-B #1

DST Test Number: 3



Superior Testers Enterprises LLC

Ref. No: 18493

Printed: 2013.09.05 @ 00:12:54