



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1210594
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: _____

1210594

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	K3 Oil & Gas Operating Company
Well Name	Nichepor 32-7
Doc ID	1210594

All Electric Logs Run

Density Neutron Log
Compensated Sonic
Microresistivity
Electric Log

Form	ACO1 - Well Completion
Operator	K3 Oil & Gas Operating Company
Well Name	Nichepor 32-7
Doc ID	1210594

Tops

Name	Top	Datum
SC	1673	710
Heebner	3775	-1392
KC	4106	-1723
Marm	4164	-1781
Paw	4210	-1827
Ft Scott	4302	-1919
Cher	4323	-1940
Miss	4406	-2023
Viola	4634	-2251

ALLIED OIL & GAS SERVICES, LLC 062996

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: great Bend

DATE <u>6-6-14</u>	SEC. <u>17</u>	TWP. <u>23</u>	RANGE <u>32</u>	CALLED OUT <u>9:00pm</u>	ON LOCATION <u>8:00pm</u>	JOB START <u>10:00pm</u>	JOB FINISH <u>11:00pm</u>
LEASE <u>Michaport</u>		WELL # <u>32-07</u>		LOCATION <u>Near city 9N 1E 1 1/2 N</u>		COUNTY <u>Near</u>	STATE <u>KO</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				SW <u>center</u>			

CONTRACTOR Duke 1 OWNER same

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 1730

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT H2O

EQUIPMENT

PUMP TRUCK # 366 CEMENTER Charles Kinsler
HELPER port ellis

BULK TRUCK # 871-112 DRIVER Kevin weighhouse

BULK TRUCK # _____ DRIVER _____

CEMENT

AMOUNT ORDERED 250 rx 60/40 4 1/2
gel & flt

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

250 rx 60/40 + 4 1/2 @ 18.92 4,730.00

flaseal 63 @ 2.97 187.11

Materials Total @ _____ 4,917.11

Disc @ 15% 737.57

HANDLING 254.2 @ 3.48 630.41

MILEAGE 10.78 x 7 x 2.75 = 207.81 380.00

REMARKS:

1st plug @ 1730' 10 BBI H2O mix
50 rx 3.5 H2O + 17.86 mud 2nd
plug 930' 80 rx 10 BBI H2O mix 80
rx 3.5 H2O + 4.54 mud 3rd 300' 50
rx 3 H2O mix 50 rx 1 BBI H2O 4th
plug @ 60' mix 20 rx
plug Rat hole 30 rx mouse hole
20 rx

DEPTH OF JOB 1730

PUMP TRUCK CHARGE 2,249.89

EXTRA FOOTAGE @ _____

MILEAGE Hum 7 @ 7.70 53.90

MANIFOLD Drill Pin @ 168.75 168.75

Hum 7 @ 4.40 30.80

_____ @ _____

TOTAL 3,513.70

15% 527.06

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

0% TOTAL 0

SALES TAX (If Any) _____

TOTAL CHARGES 8,430.81

DISCOUNT 1,264.62

IF PAID IN 30 DAYS

7,166.19

CHARGE TO: K-3- oil & gas

STREET _____

CITY _____ STATE _____ ZIP _____

Thank you!

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 Mike Godfrey

SIGNATURE Mike Godfrey

TOOLPUSHER WELL DATA SHEET

Trucking Company To Help Move In: Rain Bow

OPERATOR: K3 Oil & Gas

WELL NAME: Nichpor 32-7

SPOT LOC.: 17-23-32

COUNTY: Ness

ELEVATIONS: 2571 GL 2583 KB

GEOLOGIST: PAT Deenham

SPUD: 5-29-14 7:30 PM
(Date & Time)

CASINGS: CONDUCTOR -Set Jts. (_____)'
_____" x _____ # @ _____' w/ _____ sx _____

PLUG DOWN: _____ DATE: _____

CEMENT COMPANY: _____

SET BY: _____

WATER INFORMATION

Owe \$ _____ To: _____

Address: _____

Soc. Sec. # _____

POND _____ WELL _____ HAUL

Location: _____

(legal from SE corner if you have it)

Plt Liner From Fritzler

Pump/Line From _____

Hauled by Fritzler

Hauled From: _____

Water Well By _____

SAMPLE BAGS USED: 2 Boxes

DIRT WORK: _____ Steel Plts

Dozer: Flat Cander

Cellar/Runaround: SAME

Dozer to Help Move IN _____ OUT _____

Whose: _____

SURFACE - Set 6 Jts. (252')

8 7/8" x 23 # @ 268' w/ 180 sx _____

Class A 3% CC 2% Gel

did Circ Cement

PLUG DOWN: 1:45 AM DATE: 5-30-14

PIPE HAULED BY: operator

CEMENT COMPANY: Consolidated

PRODUCTION - Set _____ Jts. (_____)'

_____" x _____ # @ _____' w/ _____ sx _____

PLUG DOWN: _____ DATE: _____

CEMENT COMPANY: _____

CASING COMPANY: _____

DATE REACHED RTD 6-5-14

RTD 4710 LTD 4710

STATE AGENT: Mike Majer

DATE CALLED: 6-4-14

1st Plug	<u>50</u>	sx	@	<u>1730</u>
2nd Plug	<u>80</u>	sx	@	<u>930</u>
3rd Plug	<u>50</u>	sx	@	<u>300</u>
4th Plug	<u>20</u>	sx	@	<u>60</u>
5th Plug		sx	@	

Rathole w/ 30 sx Mousehole w/ 20 sx

CEMENT TYPE: 60/40 4% Gel 1/2 FS

START @ 8:15 AM

PLUG DOWN: 10:30 PM DATE: 6-6-14

CEMENT COMPANY: Allied

FLUIDS HAULED OFF BY: Fritzler

USED: 4050 gal. @ \$ 3.29

ANHYDRITE: 1671-1706

WELDER: Eid Welking

MUD COMPANY: Kansas Drilling Tech

MUD LOGGER: MBC

TESTER: Trilobite

LOGGER: Weatherford

FRAC TANK: EJK



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

K3 Oil&Gas Operating Co.

32-17s-23, Ness, KS

211 Highland cross
Houston TX 77073

Nichepor #32-7

Job Ticket: 58968

DST#: 1

ATTN: Pat Deenihan

Test Start: 2014.06.04 @ 10:40:00

GENERAL INFORMATION:

Formation: **Miss**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 16:03:45

Time Test Ended: 21:25:00

Test Type: Conventional Bottom Hole (Initial)

Tester: Brett Dickinson

Unit No: 59

Interval: 4374.00 ft (KB) To 4430.00 ft (KB) (TVD)

Reference Elevations: 2382.00 ft (KB)

Total Depth: 4430.00 ft (KB) (TVD)

2370.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 12.00 ft

Serial #: 8957 Outside

Press @ RunDepth: 115.90 psig @ 4379.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.06.04

End Date: 2014.06.04

Last Calib.: 2014.06.04

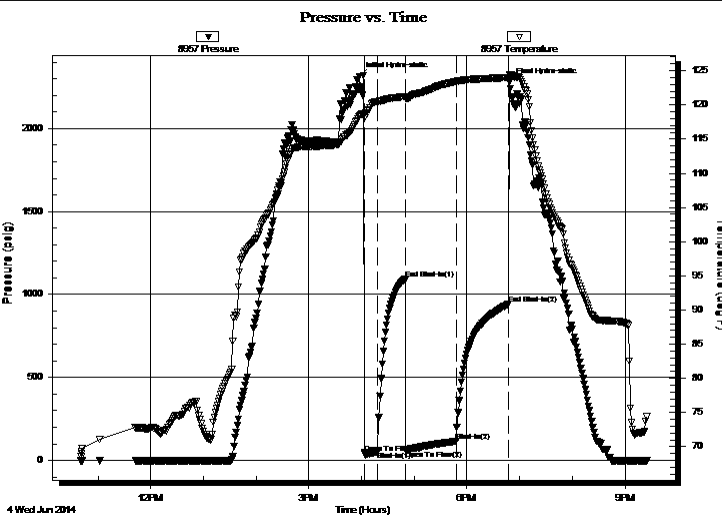
Start Time: 10:40:05

End Time: 21:25:00

Time On Btm: 2014.06.04 @ 15:57:30

Time Off Btm: 2014.06.04 @ 18:48:45

TEST COMMENT: IF-5in blow
ISI-No blow
FF-4in blow
FSI-No blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2311.22	118.40	Initial Hydro-static
7	41.88	118.11	Open To Flow (1)
21	53.82	120.43	Shut-In(1)
52	1094.31	121.21	End Shut-In(1)
53	64.42	120.96	Open To Flow (2)
111	115.90	123.39	Shut-In(2)
170	943.61	123.99	End Shut-In(2)
172	2279.93	124.43	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
80.00	OS VSWCM 5%W 95%M	1.12
125.00	MCW 60%W 40%M	1.75

Gas Rates

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



TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

K3 Oil&Gas Operating Co.

32-17s-23, Ness, KS

211 Highland cross
Houston TX 77073

Nichepor #32-7

ATTN: Pat Deenihan

Job Ticket: 58968 **DST#: 1**

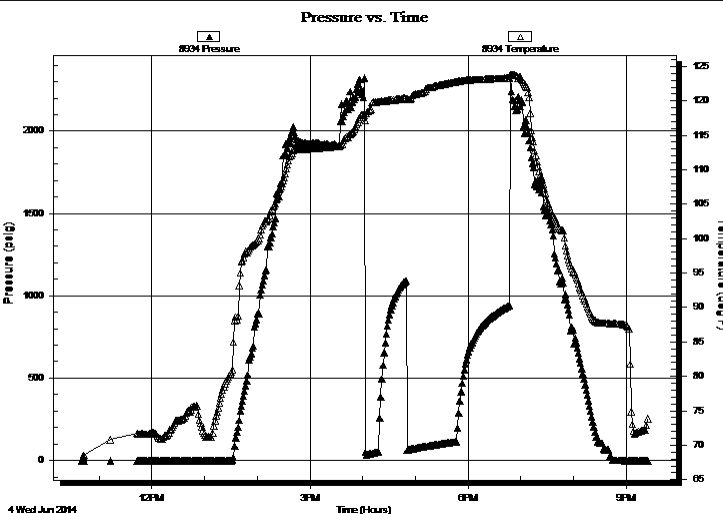
Test Start: 2014.06.04 @ 10:40:00

GENERAL INFORMATION:

Formation: **Miss**
 Deviated: **No** Whipstock: **ft (KB)** Test Type: **Conventional Bottom Hole (Initial)**
 Time Tool Opened: 16:03:45 Tester: **Brett Dickinson**
 Time Test Ended: 21:25:00 Unit No: **59**
Interval: 4374.00 ft (KB) To 4430.00 ft (KB) (TVD) Reference Elevations: **2382.00 ft (KB)**
 Total Depth: 4430.00 ft (KB) (TVD) **2370.00 ft (CF)**
 Hole Diameter: 7.88 inches Hole Condition: **Fair** KB to GR/CF: **12.00 ft**

Serial #: 8934 **Inside**
 Press @ Run Depth: **psig @ 4379.00 ft (KB)** Capacity: **8000.00 psig**
 Start Date: **2014.06.04** End Date: **2014.06.04** Last Calib.: **2014.06.04**
 Start Time: **10:40:05** End Time: **21:24:38** Time On Btm:
 Time Off Btm:

TEST COMMENT: IF-5in blow
 IS-No blow
 FF-4in blow
 FS-No blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

Recovery

Length (ft)	Description	Volume (bbl)
80.00	OS VSWCM 5%W 95%M	1.12
125.00	MCW 60%W 40%M	1.75

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

K3 Oil&Gas Operating Co.

32-17s-23, Ness, KS

211 Highland cross
Houston TX 77073

Nichepor #32-7

Job Ticket: 58968

DST#: 1

ATTN: Pat Deenihan

Test Start: 2014.06.04 @ 10:40:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 10.00 lb/gal

Cushion Length:

ft

Water Salinity:

28000 ppm

Viscosity: 51.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.79 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
80.00	OS VSWCM 5%W 95%M	1.122
125.00	MCW 60%W 40%M	1.753

Total Length: 205.00 ft

Total Volume: 2.875 bbl

Num Fluid Samples: 0

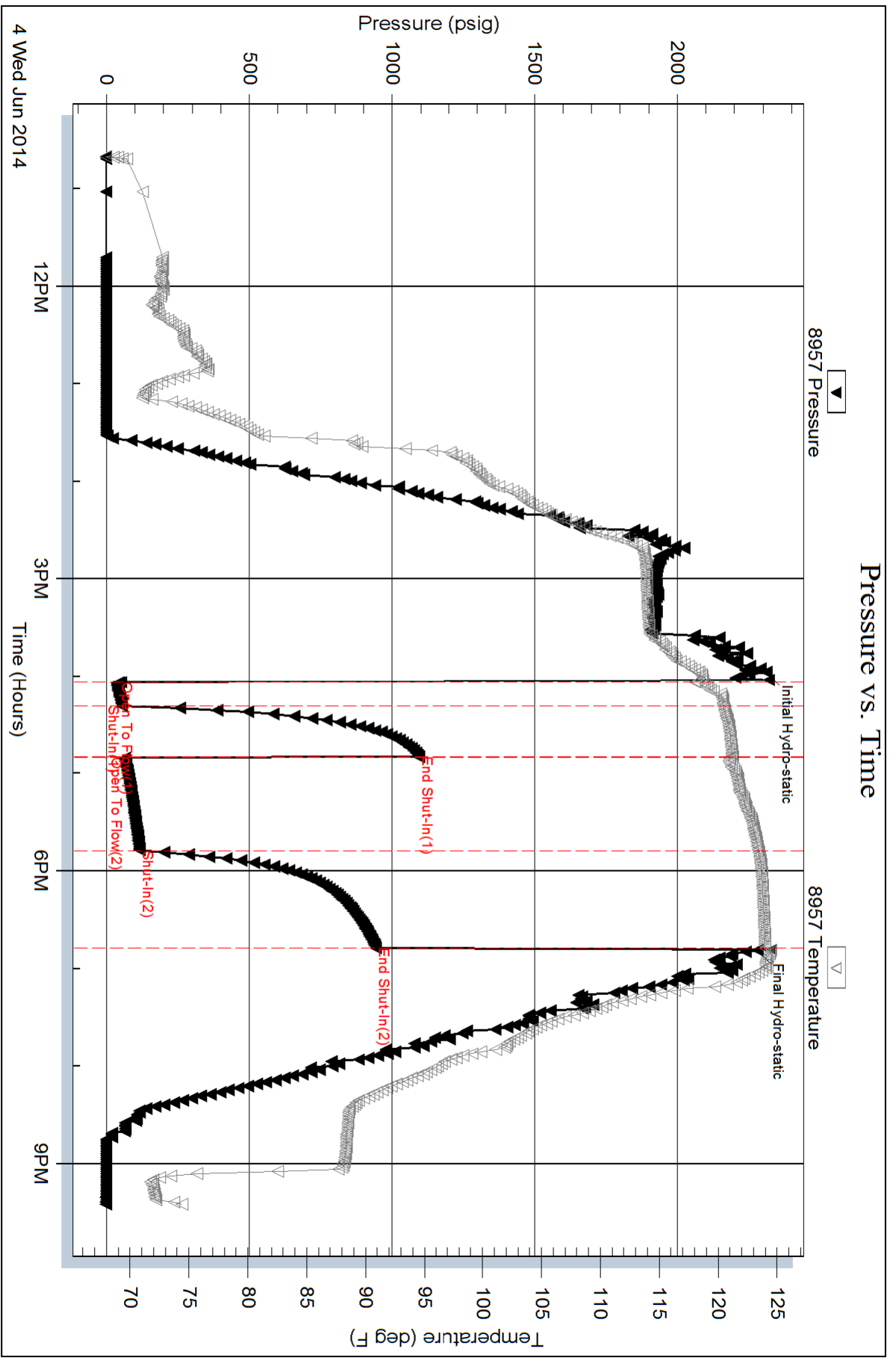
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



Serial #: 8934

Inside

K3 Oil&Gas Operating Co.

Nichepor #32-7

DST Test Number: 1

