Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1210614

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 #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
GG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
	If Alternate II completion, cement circulated from:
Operator:	
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
Recompletion Date Recompletion Date	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:

	Page Iwo	1210614
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	
INCTRUCTIONS: Chain important tang of formations paratrated Da	toil all aaroa Danart all final	conice of drill stome tests sining interval tested time test

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 (Attach Additional She	eets)	Yes No		-	on (Top), Depth ar		Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
			RECORD Ne		ion, 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 / SQU	EEZE RECORD			
Purpose:	Depth	Trace of Ocean ant	III On also I land		Turne and D		

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

(If No, skip questions 2 and 3) (If No, skip question 3)

No

No

No

(If No, fill out Page Three of the ACO-1)

Shots Per Foot		PERFORATION Specify For	I RECOF	RD - Bridge P Each Interval I	lugs Set/Typ Perforated	e			ement Squeeze Record d of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed	l Producti	ion, SWD or ENHF	? .	Producing N	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
									I	
DISPOSITI	ON OF G	AS:			METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:
Vented Solo	a 🗌 i	Jsed on Lease		Open Hole	Perf.	Dually		Commingled		
(If vented, Su	bmit ACO	9-18.)		Other <i>(Specify)</i>		(Submit A	,	(Submit ACO-4)		

Mud Rotary Drilling Andrew King - Man	y Drillin ng - Mai	Mud Rotary Drilling Andrew King - Manager/Driller			Bar Pho	Bar Drilling, LLC Phone: (719) 210-8806	ing, L 9) 210-						Ya	131 les Cente	1317 105th Rd. Yates Center, KS 66783
00	mpany/	Company/Operator	Well No.	Leas	Lease Name	_	We	Well Location	on	1/4	1/4	1/4	Sec.	Twp.	Rge,
Ron-Bob Oil	=		2		Leis		45(450fsl/2325fel	e	WW	SW	WS	<u> </u>	25S	15E
1607 Main St	St		Well API #		Type/Well	-		County		State	Total Depth	Depth	Date Started		Date Completed
Neosho Falls, KS 66758	lls, KS 6	6758	15-207-28844	344	Oil		-	Woodson		KS	1362'	32'	2/25/2014	2/;	2/27/2014
dof	Project	Job/Project Name/No.	0	-		в	Bit Record	rd				0	Coring Record	٩	
			Surface Record	cord	Туре	Size		From	То	Core #		Size	From	То	% Rec.
	Driller/Crew	'Crew	Bit Size:	11 1/4	PDC	11 1/4		Q.	40'						
Andy King			Casing Size:	8 5/8	PDC	6 3/4		40'	1556'						
			Casing Length:	40'											
			Cement Used:	10sx							_				
			Cement Type:	Portland											
From	5	Eom	Eormation	Epom	5		T .	Ecomotion			-	5		Ecomotion	2
0	2	soil		1126	1144		san	sandy shale							
2	248	clay/shale		1144	1145			lime							
248	304	lime		1145	1154			shale							
304	385	shale		1154	1200		san	sandy shale							
385	480	lime		1200	1234		s	shale							
480	513	shale		1234	1235			lime							
513	720	lime		1235	1239		blac	black shale							
720	901	shale		1239	1362		grey s		lle						25
901	919	lime													
919	928	shale													
928	941	lime													
941	971	sandy shale													
971	985	lime													
985	994	shale													
994	1019	lime													
1019	1029	sandy shale													
1029	1050	lime													
1050	1065	shale								Well Notes:	otes:				
1065	1075	lime													
1075	1114	broken lime/shale								J					
1114	1116	oil show													
1116	1119	better sand													
1119	1123	broken sand oil show	how							1					
1123	1126	badly broken sand	đ.												

Hurricane Services, Inc. 3613 A Y Road Madison, KS 66860 Office # 620-437-2661 Brad Cell # 620-437-6765



Ticket Number_	100367
Location	Madison

Foreman____

Brad Butter

Cement Service ticket Well Name & Number Sec./Township/Range County Customer # Date if Woodson l'in l'e 2-28-14 Zip City State Mailing Address Customer Row - Bob Oil

Job Type:	LONGSTEMS		Truck #	Driver
Job Type.			201	Kelly
Hole Size: 6314"	Casing Size: 41/2"	Displacement: 211/2 Bbls	202	Jerry
Hole Depth: 1362 -	Casing Weight: Used Place	Displacement PSI: 550	106	charlie
Bridge Plug:	Tubing:	Cement Left in Casing: O	144-150	Bryca
Packer:	PBTD: 1350-		2	,
	•			State of a
Quantity Or Units	Description of S	Servcies or Product	Pump charge	790.00
40	Mileage		\$3.25/Mile	130.00
and a second				
143 SACHS	Thick Set Cen	rent	18.60	2659.80
715 165.	Thick Set Cro KOL-SEAL	5th Peysk	,65	464.75
1101 100				•
300 1bs	Gel Flush		.30	90,00
<u>Jus</u>	Corea Masel			
3/2 His	WATE Truck		84.00	294.00
3 Hs	WATE Truck WATE TRASPORT		105,00	315,00
			*	
40 miles	Truck #11		1.50	60.00
	Witchine Service	s	50.00	NIC
8.2 Tons	Bulk Truck		1.30 =	426.40
14				
1	Plugs 41/2" Top Rubber	Plus	38,00	38.00
<i>f</i>			Subtotal	5267.95
		7.570	Sales Tax	232.55
			Estimated Tot	al 53 00,55

Floatsho 350 Remarks: Te COANTIN Pamorel 15 Bin 24-8 1.12 11-1-1 Stosh WATE 100 3 ThickSelcen SEAL ec. 1 Mired SHA 11 Bhi 142ATA Pampe CATES Roboase Ton R. P/ Di P/-, mat Lines Bumpal Plus To Cener Tero. Sloop cashy to wi 5000 O 1000 " Thank Vea"

Called 6

Customer Signature