



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1212308  
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: \_\_\_\_\_

1212308

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERMS	CLERK	DATE	TIME
5				CASH/CHECK/BANKCARD	SE	5/23/14	10:42

\*\*\*\* CASH \*\*\*\*

S  
H  
I  
P  
T  
O  
 OSAGE ENERGY  
 CAMP SERVICES - *surface*

TERM 1

DOCH C95173  
 \*\*\*\*\*  
 \* INVOICE \*  
 \*\*\*\*\*

TAX : 001 IOLAL IOLA

SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXTENSION
50		EA PC		PORTLAND CEMENT		50	9.45 /EA	472.50

\*\* PAYMENT RECEIVED \*\* 512.19 TAXABLE 472.50  
 \*\* PAID IN FULL \*\* NON-TAXABLE 0.00  
 SUBTOTAL 472.50

X  
 RECEIVED BY \_\_\_\_\_

CHECK PAYMENT 512.19

Lone Jack Oil Company

Blue Mound, KS

1-913-756-2307 1-620-363-0492

Lease: RE Camp Operator: Evans Oil API # 15-011-24442-0000  
 Contractor: Lone Jack Oil Company Date Started: 6/16/14 Date Completed: 6/18/14  
 Total Depth: 667 feet Well # 22-OE Hole Size: 5 5/8  
 Surface Pipe: 20' 7" Surface Bit: 9 7/8 Sacks of Cement: 5

Depth of Seat Nipple: Rag Packer At:  
 Length and Size of Casing: 656- 2 7/8 Sacks of Cement: 85  
 Legal Description: NE,NW,NE,NE Sec: 36 Twp: 23S Range: 21E County: Bourbon

Thickness	Depth	Type of Formation	Core Thickness	Depth	Time
	3	Top Soil	1	633-634	2:11 Shale Sandy
11	44	Lime	2	634-635	6:38 Sandy Shale
5	50	Shale	3	635-636	4:06 Sandy Shale
2	52	Lime	4	636-637	1:45 Oil Sand
3	55	Shale	5	637-638	1:08 Oil Sand
3	78	Lime	6	638-639	0:49 Oil Sand
3	81	Shale	7	639-640	0:36 Oil Sand
4	85	Lime	8	640-641	0:40 Oil Sand
5	91	Shale	9	641-642	0:54 Oil Sand
5	97	Lime	10	642-643	1:21 Oil Sand
7	98	Shale	11	643-644	1:13 Oil Sand
9	107	Lime	12	644-645	0:58 Oil Sand
2	109	Shale	13	645-646	1:58 645 1/2 Oil Sand
2	111	Lime	14	646-647	6:27 Shale Sandy
14	225	Shale	15	647-648	7:25 Shale Sandy
4	229	Lime	16	648-649	7:53 Shale Sandy
7	276	Shale	17	649-650	7:05 Shale Sandy
2	278	Lime			
3	286	Shale			
0	296	Lime			
58	364	Shale			
2	366	Lime			
3	369	Shale			
2	381	Lime			
7	388	Shale			
5	393	Lime			
44	437	Shale			
3	440	Lime			
4	444	Shale			
9	453	Lime			
0	463	Shale			
4	467	Lime			
65	632	Shale			
1	633	Oil Sand (Good Bleed)			
17	650	Ran Core			
17	667	Shale (Sandy)			
	667	TD			

802 N. Industrial Rd.  
 P.O. Box 664  
 Iola, Kansas 66749  
 Phone: (620) 365-5588

# Payless Concrete Products, Inc.



roadways, risk. The maximum allotted time for unloading this concrete contains correct charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request. Contractor must provide place for truck to wash out. A \$30 charge will be added per truck if contractor does not supply a place to wash truck out. Tow charges are buyers responsibility.

**NOTICE TO OWNER**  
 Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

SOLD TO:  
 09002  
 USAGE ENERGY  
 2100 W. VIRGINIA RD  
 COLONY MS 66017

# 1773  
 900 <sup>10</sup>/<sub>100</sub>  
 Paid  
 T.C.

LEASED CAMP

22-0E

SHIP TO:

54 E TO HWY 3 N TO HWY 65 E 1MI  
 TO 35TH ST N 1MI WSD

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	DRIVER/TRUCK	PLANT/TRANSACTION #
11:16 AM	WELL	0.50	8.50	35	BOUCO
DATE	LOAD #	YARDS DEL	BATCH#	WATER TRIM	TICKET NUMBER
6/16/14	WELL#2 DE	8.50	10	0.00	37108

**WARNING**  
**IRRITATING TO THE SKIN AND EYES**  
 Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water. If Irritation Persists, Get Medical Attention. KEEP CHILDREN AWAY.

CONCRETE is a PERISHABLE COMMODITY and BECOMES the PROPERTY of the PURCHASER UPON LEAVING the PLANT. ANY CHANGES OR CANCELLATION of ORIGINAL INSTRUCTIONS MUST be TELEPHONED to the OFFICE BEFORE LOADING STARTS.

The undersigned promises to pay all costs, including reasonable attorneys' fees, incurred in collecting any sums owed.

All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum.

Not Responsible for Reactive Aggregate or Color Quality. No Claim Allowed Unless Made at Time Material is Delivered.

A \$30 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.

Excess Delay Time Charged @ \$80/HR.

**PROPERTY DAMAGE RELEASE**  
 (TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)

Dear Customer-The driver of this truck in presenting this RELEASE to you for your signature is of the opinion that the size and weight of his truck may possibly cause damage to the premises and/or adjacent property if it places the material in this load where you desire it. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE relieving him and this supplier from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of this material, and that you also agree to help him remove mud from the wheels of his vehicle so that he will not litter the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and this supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.

SIGNED \_\_\_\_\_

**Excessive Water is Detrimental to Concrete Performance**  
**H<sub>2</sub>O Added By Request/Authorized By**

\_\_\_\_\_ GAL X \_\_\_\_\_

WEIGHMASTER \_\_\_\_\_

**NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.**

LOAD RECEIVED BY: \_\_\_\_\_

X *Wyatt Johnson*

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
8.50	WELL	WELL (10 SACKS PER UNIT)	8.50	
2.50	TRUCKING	TRUCKING CHARGE	2.50	
8.50	MIX&HAUL	MIXING AND HAULING	8.50	

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
		243	1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER	
			6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
LEFT PLANT	ARRIVED JOB	START UNLOADING		TIME DUE
				DELAY TIME

TAX 7.15

ADDITIONAL CHARGE 1 \_\_\_\_\_  
 ADDITIONAL CHARGE 2 \_\_\_\_\_

# Invoice

**Lone Jack Oil Company**  
**509 East Walnut**  
**Blue Mound, KS 66010**

Date	Invoice
6/19/2014	1705

**Bill To**  
Osage Energy LLC  
2100 West Virginia Road  
Colony, KS 66015

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
1	6/18/14, Well #22-OE, circulated 85 sacks of cement to surface, pumped plug and set float shoe.	700.00	700.00
1	Water Truck	100.00	100.00
	Sales Tax	7.40%	59.2

			Total
Thank you for your business.			\$859.2